

LICKING MEMORIAL HEALTH PROFESSIONALS INTERVIEW EVALUATION FORM

CANDIDATE:

INTERVIEWER:

SPECIALTY:

DATE OF INTERVIEW:

Directions: Please rate the performance of the candidate using the following criteria. For each item, rate the candidate on a scale from 1 to 5 (**1 = Not acceptable, 2 = Limited, 3 = Acceptable, 4 = Above average, 5 = Excellent**). Please comment as necessary. Complete the overall evaluation of the candidate at the end of the evaluation form. Fax or email to Christine McGee at 7901 immediately following the interview. Thank you.

CRITERIA	1	2	3	4	5	COMMENTS
1. Education						
2. Training						
3. Relevant Work Experience						
4. Presentation:						
Completeness of CV						
Self-Confidence/Comfort Level						
Overall appearance						
Would convey a favorable image of Licking Memorial Health Systems						
5. Communication Skills:						
Body language/eye contact						
Communication is clear, concise, and direct.						
Responses to questions are appropriate.						
Relates and communicates well well with different people						
6. Personality/Interpersonal Skills:						
Enthusiastic and interested						
Motivation						
Appears cooperative and open-minded						
7. Interest in and knowledge of LMHS.						
8. Professional "fit" with department						
9. Personal "fit" with colleagues/staff						
OVERALL EVAL. OF CANDIDATE:						
<input type="checkbox"/> Recommend for position without reservation						
<input type="checkbox"/> Recommend for position with some reservation (see comments)						
<input type="checkbox"/> Do not recommend for position (see comments)						