

## SONOCO PERSONNEL EVALUATION

Evaluator Rig Steward/Ex St Time on Location (Days) (Wks.) Regular Assignment Relief  SYSTEM (Scale)  1 (low)-10 (high) 6= Average Any mark below 5 must be explained below in COMMENTS SECTION  Uniforms (Check Y/N) Yes No Attitude Khaki/Checked Pants Work Performance Gray/White shirt Ability to follow instructions Safety Shoes Aptitude for job SONOCO Cap Follows safe work procedures  Appearance Length of hair Clean shaven Personal hygiene Uniforms clean  Cooks Ability to manage personnel Location cleanliness Proper grocery order procedures Laundry procedures correct Paperwork correct / done daily Communicates with office Menu used / adequate for job Job Safety Analysis written  Evaluator's Signature Date Employee's Signature Date  Evaluator's Signature on this evaluation form I certify-that no accident has occurred to me in this pay period. I confirm if any accident has occurred to my Immediate supervisor.	Date	lab L t		
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