

Retail Staff Training Evaluation Sheet

Trainee Name:

Trainer Name:

Store/Branch:

Training Date:

Evaluation Criteria

Criteria	Rating (1-5)	Comments
Product Knowledge	<input type="text"/>	<input type="text"/>
Customer Service Skills	<input type="text"/>	<input type="text"/>
Communication	<input type="text"/>	<input type="text"/>
Sales Techniques	<input type="text"/>	<input type="text"/>
Teamwork	<input type="text"/>	<input type="text"/>
Attendance & Punctuality	<input type="text"/>	<input type="text"/>

Strengths Observed:

Areas for Improvement:

Additional Comments:

Evaluator Signature:

Date: