

# Retail Store Manager Evaluation Form

## General Information

Manager Name

Store Location

Evaluation Period

Date of Evaluation

Evaluator Name

## Performance Evaluation

Sales Performance

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Customer Service

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Team Leadership

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Inventory Management

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

Problem Solving

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5

**Comments & Recommendations**

Strengths

Areas for Improvement

Additional Comments