

KINGDOM HALL CONSTRUCTION SERVANT EVALUATION

INSTRUCTIONS: This form should be completed each year by January 1, or when a Kingdom Hall construction servant discontinues his service. Please return completed evaluations to the Kingdom Hall Construction Desk. The construction desk should forward any evaluations that raise concern to the Branch Committee.

Name:		Date:	
Birth Date:	<input type="checkbox"/> Married	<input type="checkbox"/> Ministerial Servant	List skilled trade(s) not requiring supervision:
Baptism Date:	<input type="checkbox"/> Single	<input type="checkbox"/> Elder	
Start Date:			What languages does he/she speak fluently?
Years of Full-Time Service:			
Appointment Date:	Discontinue Date:		Sick days for the past 12 months:

Ratings symbols for this section: A = Excellent B = Good C = Average D = May Not Qualify	KHC Group Overseer	KHC Group Asst. Overseer	KHC Desk Rep.	Additional Comments (What, if any, specific counsel was needed, and has it been given? Please explain.)
Displaying Fruitage of Spirit				
Field Service				
Meeting Attendance				
Dealings With Others				
Cooperative				
Dress and Grooming				
Communication Skills				
Organizational Ability				
Work Habits				
Workmanship				
Health And Stamina				

If specific counsel has been given, what was the response?

Do you recommend him/her to continue in his/her assignment? Yes No

Explain:

PRESENT ASSIGNMENT (Please check box(es) below indicating present level of oversight, if applicable.)	WHAT LEVEL(S) OF OVERSIGHT DO YOU RECOMMEND THIS INDIVIDUAL FOR? (Please check box(es) below indicating recommended level of oversight, if applicable.)	Additional Comments (What training is being provided to assist him to qualify for additional responsibilities?)
<input type="checkbox"/> KHC Desk Overseer		
<input type="checkbox"/> KHC Desk Assistant Overseer		
<input type="checkbox"/> KHC Desk Representative		
<input type="checkbox"/> KHC Group Overseer		
<input type="checkbox"/> KHC Group Assistant Overseer		
<input type="checkbox"/> Quality Control		
<input type="checkbox"/> Safety Overseer		

 KHC Group Overseer KHC Group Assistant Overseer KHC Desk Representative Date