Medical Staffing Partners Professional Evaluation of Performance

Please take a moment to complete this performance evaluation on the individual listed below. The MN Department of Human Services requires a reference on every supplemental professional employed by Medical Staffing Partners, Inc. Upon Completion, you may fax this form to: **800-544-2602**. Thank you.

Applicant Name			
Employer	Position Held	Dates	
Employer Address	City State		
Supervisor / Contact Person	Contact Number	Contact Number	

Please rate the following attributes by checking the appropriate box below.

	Excellent	Above Average	Satisfactory	Below Average	Poor
Adaptability to Environment					
Attendance/Punctuality					
Attitude					
Dependability					
Professionalism					
Quality of Work					
Quantity of Work					
Team Player					

Is this individual eligible for rehire? Additional Comments: 🗌 Yes / 🗌 No

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