



AFFORDABLE
I N N S

Coaching Form

Employee Name: _____ Date: _____

Position: _____ Department: _____

Location: _____ Supervisor Name: _____

Comments:

Weak Points are:

Strong points are:

These weaknesses can be strengthened by:

These strengths can be used more effectively by:

Supervisor Signature: _____ Title: _____

A copy of this report has been given to me and has been discussed with me.

Employee Signature: _____ Date: _____