

Evaluation Form

Employee Information:				
Seafarer's Name:	Date of Review:			
Department:	Vessel Name:			
Rank:	Date of Evaluation:			
Immediate supervisor:	Length on board:			
Reason for Evaluation:				
<input type="checkbox"/> Mid-contract	<input type="checkbox"/> Master leaving vessel	<input type="checkbox"/> Seafarer leaving vessel	<input type="checkbox"/> Follow-up review	
<input type="checkbox"/> Other	Specify:			
Assessment of key Performance Requirements:				
The statements below describe "Effective" performance relative to the job/rank of the seafarer.				
Assess the seafarer's performance in comparison to the requirements, by checking the appropriate box.	Highly Effective	Effective	Improvement Required *	
1	Knowledge of and Ability to do the job <ul style="list-style-type: none"> Always complies with Company rules and procedures Always carries out duties as instructed If unsure about an allocated work task, always asks for clarification before starting the job 	—	—	—
2	Safety and Environment <ul style="list-style-type: none"> Always carries out tasks and duties in a safe manner Advises an Officer whenever he/ she becomes aware of an unsafe working practice / situation Always complies with Company Drug and Alcohol Policy Understands and complies with shipboard security procedures Complies with vessel environmental policies and regulations 	—	—	—
3	Teamwork and Supervisory Skills <ul style="list-style-type: none"> Performs tasks and duties assigned in a positive and willing manner Contributes to a harmonious onboard work environment Does not wait to be asked to provide help and support to fellow crew members Remains calm and level headed when under pressure Shows good motivation to learn Accepts additional responsibilities to improve knowledge and 	—	—	—
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	skills <ul style="list-style-type: none"> Organizes crew members to carry out duties if required 			
4	Personal Qualities <ul style="list-style-type: none"> Acts at all times in a professional manner Shows respect to shipboard colleagues Takes pride in doing a good job Maintains a positive outlook 	—	—	—
5	Effective Communication Skills: <ul style="list-style-type: none"> Demonstrates English language level to the appropriate rank Is effective in communicating ideas to fellow crew Is effective with written tasks as needed 	—	—	—

***When Improvement is required, the Appraiser MUST state below where specifically this is required**

Comments:	
Please provide on Seafarer's overall performance. Highlight key strengths or areas needing improvement.	
Appraisers Comments:	
Specific actions or recommendations required for improvement:	

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Seafarer's Comments and/ or acknowledgement of understanding recommendations provided:

Appraiser's Signature

Date

Seafarer's Signature

Date

Name of Captain (if not appraiser)

Captain's Signature

Date

Recommended follow-up review date (if needed) _____

Date

Upon completing the review: 1) make a copy for the Ship's records; 2) provide the seafarer with the original; 3) and submit a scanned copy to the following address – evaluations@tdi-bi.com

(NOTE – this document is confidential. Please remember to remove any copies from the ship's computer when you are finished).

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