

ERC ENROLLMENT MEETING EVALUATION

Enroller Performance Review



ENROLLER INFORMATION	
Name	Case ID #-
City where Fair was held	Date
# of employees at your location	Approx # of employees in attendance at fair

RATINGS	1 = Poor	2 = Fair	3 = Satisfactory	4 = Good	5 = Excellent
Product Knowledge	<input type="checkbox"/>				
<i>Comments</i>					
Table Appearance	<input type="checkbox"/>				
<i>Comments</i>					
Attendance/Punctuality	<input type="checkbox"/>				
<i>Comments</i>					
Initiative	<input type="checkbox"/>				
<i>Comments</i>					
Communication/Listening Skills	<input type="checkbox"/>				
<i>Comments</i>					
Friendliness	<input type="checkbox"/>				
<i>Comments</i>					
Overall Rating (average the rating numbers above)					

EVALUATION
ADDITIONAL COMMENTS
<i>May we follow up with you? Please provide us with your phone number.</i>

PLEASE COMPLETE AND RETURN TO:	
<i>Pat Galla, Enroller Resource Center, Fax # 502-327-9113 Thank you for providing us with this valuable feedback.</i>	
Your Name	Date
Benefit Fair City	