

INTERVIEW ASSESSMENT FORM

Applicant' s Name

Position Assessed For	Date
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Language Proficiency

	Fluent	Acceptable	Unacceptable
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cantonese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Putonghua	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evaluation *(Factors and weightings should be agreed by the interviewers prior to the interview)*

Rate the interviewee on the factors according to maximum scale of 10

1 & 2 - Poor 3 & 4 -Below Average 5 & 6 - Average 7 & 8 - Above Average 9 & 10 - Excellent

Relevant Factors	Weighting	Score										Total Weighted Score
		1	2	3	4	5	6	7	8	9	10	
<i>Expertise</i>												
<i>Drive/Enthusiasm</i>												
<i>Critical Thinking</i>												
<i>Business Mindedness</i>												
<i>Team Work Orientation</i>												
<i>Customer Orientation</i>												
<i>Leadership Traits</i>												
<i>Communication Skills</i>												
<i>Concern For Safety & Environment</i>												
<i>Other ()</i>												
<i>Other ()</i>												
		TOTAL SCORE										

Overall Assessment of Applicant's Suitability

(Justifications must be given if an applicant to be appointed cannot satisfy the required qualification and/or experience)

<u>Internal Candidate</u>	Last Year Rating _____ Year Before Last _____
From PMS Record (if appropriate)	
Strengths and Weaknesses Noted	
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Authorisation :

- Appoint**

 Waitlist

 Reject

Follow Up Action Required

Other Actions

Interviewed by (Name in Block Letters)	Department/Branch/Section	
Signature _____ Date _____		
Appointment authorised by (Name in Block Letters)	Department/Branch/Section	
Signature _____ Date _____		
For Human Resources Unit Use		
Position Appointed	Department/Branch/Section	
Grade/Salary	Effective Date	
Date of Medical Exam.	Medical Exam. Result	Appointment Letter Sent On