

Sample Two: In-House Candidate Post-Visit Evaluation Form

Candidate's Name: _____

Candidate's Specialty: _____

Interviewed By: _____ Date: _____

Please take a few moments to complete this Candidate Evaluation Form with your impressions of the candidate. Please rate the candidate on a scale from 1-5, with 5 being the highest rating and 1 being the lowest rating. If you are unable to assess any particular area, please indicate "not applicable."

Communication Skills

The candidate appeared to be open and responsive to questions.

1 2 3 4 5 N/A

Knowledge and Skills

The candidate's knowledge and skills will enhance our medical staff.

1 2 3 4 5 N/A

Patient Relationships

The candidate will be respectful and compassionate towards patients and their families.

1 2 3 4 5 N/A

Professional Relationships

The candidate will be able to interact well with medical staff colleagues and hospital personnel.

1 2 3 4 5 N/A

Experience

The candidate will be able to function alone or work well within a group setting, without mentoring.

1 2 3 4 5 N/A

Comments: _____
