CONFIDENTIAL INTERVIEW EVALUATION
XYZ Health Center
Office of Physician Recruitment

Candidate's Name: ____________________________
Specialty/Position: __________________________
Date of Interview: ____________________________
Intervener: ____________________________

Please evaluate this candidate on the areas indicated below by placing a check in the appropriate box, along with any comments in the sections provided.

1. **First Impression**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

2. **Professional Appearance**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

3. **Practice Style/Philosophy**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

4. **Knowledge Base for Position**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

5. **Level of Practical Experience**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

6. **Interpersonal Skills**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

7. **Ability to Communicate**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

8. **Attitude and Enthusiasm**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

9. **Goals and Ambition**
   - Outstanding
   - Avg
   - Average
   - ▼Avg
   - Unacceptable
   Comments: ____________________________

10. **Capability**
    - Outstanding
    - Avg
    - Average
    - ▼Avg
    - Unacceptable
    Comments: ____________________________
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11. Ability to be a Team Player
Outstanding □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Comments:___________________________________________

12. Leadership Skills
Outstanding □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Comments:___________________________________________

13. Attitude re: Pt/Cust Satisfaction
Outstanding □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Comments:___________________________________________

14. Overall Appraisal
Outstanding □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Comments:___________________________________________

Additional Comments:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

RECOMMENDATIONS: □ Recommend an offer be made
□ Second interview suggested
□ Continue looking

INTERVIEWER’S SIGNATURE: ____________________________ Date: __________________

PLEASE RETURN TO: Laura Screeneey, CMSR
Office of Physician Recruitment
XYZ Health Center
lscreeneey@earthlink.net