



**INTERVIEWEE EVALUATION FORM**  
**CLASS OF \_\_\_\_\_**

**PART 1: To be completed by the candidate before interview**

First Name, Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Program:      Ph.D.      M.B.A.      M.A.      M.Ed.

Institute/University: \_\_\_\_\_ Degree: \_\_\_\_\_

Major: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Position: \_\_\_\_\_ Years with Company: \_\_\_\_\_

**PART 2: For official use only**

Intellectual Ability (Pass/Fail)	General Knowledge (Pass/Fail)	Personality (Pass/Fail)	Total (Pass/Fail)

Remarks:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

( \_\_\_\_\_ )  
 Interviewer