

QUALITY ASSURANCE DEPARTMENT

Individual Call Review Form

To use this form, click File → Make a Copy to save a copy to your own Google Drive or File → Download to download as Excel.

AGENT NAME:	
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OVERALL SCORE:	0%
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Date of Review:	
Call Identifier:	
Reviewed By:	

Category 1	Presentation	Achieved	Category %	Agent %	Reviewer Comments
	Greeted Caller Properly		20%	0	
	Spoke Clearly		20%	0	
	Helpful or Friendly Tone		30%	0	
	Professional Demeanor		30%	0	
		TOTAL		100%	0%

Category 2	Conversational Skills	Achieved	Category %	Agent %	Reviewer Comments
	Actively Listened to Caller		35%	0	
	Controlled Call Flow		25%	0	
	Displayed Empathy Appropriately		25%	0	
	Avoided Dead Air / Long Pauses		15%	0	
		TOTAL		100%	0%

Category 3	Call Management	Achieved	Category %	Agent %	Reviewer Comments
	Followed Scripted Text		30%	0	
	Followed Instructions / Procedure		30%	0	
	Entered Data Correctly		20%	0	
	Processed Call at Appropriate Pace		20%	0	
		TOTAL		100%	0%

Date of Coaching:	
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Agent Feedback