

360° Feedback

Feedback on my role as Team Lead / Operator

How does it work?

1. Choose four people around you: one person from HR, one supervisor or manager, one Team Lead and one colleague from the floor.
2. Give or send each of them one form from this document (print it or forward it digitally).
3. Ask them to fill it in honestly — it is about your role as Team Lead (or Operator).
4. Receive the feedback with LSD: Listen, Summarise, ask questions — do not defend yourself.
5. Compare the four perspectives: what comes back more than once? That is your growth area.

The next 4 pages each contain one form — one per feedback giver.

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360° FEEDBACK FORM

HR employee**To be filled in by: HR employee**

Feedback for (name): _____

His / her role: ☐ Team Lead ☐ _____

Operator

Your name (optional): _____

Date: _____

1. What does he/she do well in their role? (strengths — be specific)

2. What could he/she do better or differently?

3. Score the following (circle one number — 1 = rarely · 5 = almost always)

Communicates clear expectations	1 2 3 4 5
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Listens well and asks good questions	1 2 3 4 5
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Gives constructive feedback and follows up on agreements	1 2 3 4 5
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Is approachable and works well together	1 2 3 4 5
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4. What is the ONE concrete tip you would like to give?

Thank you! Please hand this form back to the person who asked you.

360° FEEDBACK FORM

Supervisor / Manager

To be filled in by: Supervisor / Manager

Feedback for (name):

His / her role: ☐ Team Lead ☐ Operator

Your name (optional):

Date:

1. What does he/she do well in their role? (strengths — be specific)

2. What could he/she do better or differently?

3. Score the following (circle one number — 1 = rarely · 5 = almost always)

Communicates clear expectations	1 2 3 4 5
Listens well and asks good questions	1 2 3 4 5
Gives constructive feedback and follows up on agreements	1 2 3 4 5
Is approachable and works well together	1 2 3 4 5

4. What is the ONE concrete tip you would like to give?

Thank you! Please hand this form back to the person who asked you.

360° FEEDBACK FORM

Team Lead**To be filled in by: Team Lead**

Feedback for (name):

His / her role: ☐ Team Lead ☐

Operator

Your name (optional):

Date:

1. What does he/she do well in their role? (strengths — be specific)**2. What could he/she do better or differently?****3. Score the following (circle one number — 1 = rarely · 5 = almost always)**

Communicates clear expectations	1 2 3 4 5
Listens well and asks good questions	1 2 3 4 5
Gives constructive feedback and follows up on agreements	1 2 3 4 5
Is approachable and works well together	1 2 3 4 5

4. What is the ONE concrete tip you would like to give?

Thank you! Please hand this form back to the person who asked you.

360° FEEDBACK FORM

Colleague from the floor

To be filled in by: Colleague from the floor

Feedback for (name):

His / her role: ☐ Team Lead ☐ Operator

Your name (optional):

Date:

1. What does he/she do well in their role? (strengths — be specific)

2. What could he/she do better or differently?

3. Score the following (circle one number — 1 = rarely · 5 = almost always)

Communicates clear expectations	1 2 3 4 5
Listens well and asks good questions	1 2 3 4 5
Gives constructive feedback and follows up on agreements	1 2 3 4 5
Is approachable and works well together	1 2 3 4 5

4. What is the ONE concrete tip you would like to give?

Thank you! Please hand this form back to the person who asked you.