

CAR WARS WEEKLY SELF-SCORING SHEET



Team member (who's completing the form)

Manager (who's getting the completed form)

Overall (Add Your 5 Scores)

CALL #1	CALL DATE: _____ CALL TIME: _____ CALL LENGTH: _____ PHONE #: _____	Would you classify this customer as: OEASY O AVERAGE ODIFFICULT Did you ask for an appointment at least one time: OYES ONO How would you rate your overall performance on this opportunity: 10 is the best <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10	What did I do right?	What did I do wrong?
	CALL DATE: _____ CALL TIME: _____ CALL LENGTH: _____ PHONE #: _____	Would you classify this customer as: OEASY O AVERAGE ODIFFICULT Did you ask for an appointment at least one time: OYES ONO How would you rate your overall performance on this opportunity: 10 is the best <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10	What did I do right?	What did I do wrong?
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