

90-Day Management Review

Complete this review with evidence. Decide what changed, what did not, and what the next ninety days require.

Area	Day 1 Condition	Day 90 Result	Evidence	Next Priority
Guest Experience				
Food Quality				
Food Safety / Compliance				
Staffing / Capability				
Training				
Scheduling / Labor				
Food Cost / Waste				
Cash / Transaction Control				
Facility / Equipment				
Management Communication				
Succession / Backup				
Overall Operating Control				

90-Day Manager Sign-Off

- I can explain the restaurant's current strengths and major risks with evidence.
- Employees understand the most important standards.
- Critical food-safety and safety risks have active control.

- The schedule reflects business demand and skill mix.
- Important financial exceptions are reviewed routinely.
- At least one person has developed additional leadership or backup capability.
- My direct supervisor has received the results and next-quarter priorities.

Manager:	
Reviewer:	
Review Date:	
Next 90-Day Review Date:	