



Operations Evaluation



Store: pick Evaluation Date: pick **MM/DD/YYYY** Evaluation Time: pick **HH:MM XX** Entered by:

Store Name: _____ Please enter your email address on the right. Email Address:

Overall Percentage: -- (0 / 0)

Inspirational Design: Exterior: Lobby: Marketing Material: Uniform Standards: Behind Counter/BOH:	Outstanding Service: Leading the Shift: Staffing Levels: TM Service Engagement: Training: Food Safety Standards:	Distinctive Products: Yogurt: Fruit Toppings: Dry Toppings: Refrigeration/Freezers: Small Wares:	Overall Compliance:
---	--	--	----------------------------

Inspirational Design (33%)

Scoring - 2 "No's" in any category area fails the category. Four categories per section are required for passing; must pass all sections to be in compliance.

Exterior

- 1. Storefront: signage, trellis, landscape, patio, front door, lighting**
 NA Yes No

Storefront: Display Details?
 Yes No
- 2. Windows: clean, graphics straight**
 NA Yes No

Windows: Display Details?
 Yes No
- 3. Health Department: Current available, grade/score posted**
 NA Yes No

Health Department: Display Details?
 Yes No
- 4. EcoSure: Last Score**
 NA Yes No

EcoSure: Display Details?
 Yes No

Notes:

Lobby

1. **Music: Proper levels, approved playlists** NA Yes No
Music: Display Details? Yes No
2. **Flooring: Pebble, concrete, tile** NA Yes No
Flooring: Display Details? Yes No
3. **Customer Area: Tables, chairs, benches, restrooms, trash cans** NA Yes No
Customer Area: Display Details? Yes No
4. **Walls, Ceiling, Windows: Glass, paint, vents, zebra** NA Yes No
Walls, Ceiling, Windows: Display Details? Yes No
5. **Lighting: Track, topping bar, flower wall, display, la klint** NA Yes No
Lighting: Display Details? Yes No

Notes:

Marketing Material

1. **POP: Storefront, wall, banner stand** NA Yes No
POP: Display Details? Yes No
2. **Topping Bar/Glass Display: Sneeze guard, plexi** NA Yes No
Topping Bar/Glass Display: Display Details? Yes No
3. **Counter Display: Gift card display, POS, plexi** NA Yes No
Counter Display: Display Details? Yes No
4. **Menu Board Wall: Menu board, other back wall displays** NA Yes No
Menu Board Wall: Display Details? Yes No

Notes:

Uniform Standards

1. **Uniform 1: Gray Apron, White logo T-shirt, white baseball cap** NA Yes No
Uniform 1: Display Details? Yes No
2. **Uniform 2: Gray Polo/Blue T-shirt, white baseball cap** NA Yes No
Uniform 2: Display Details Yes No

Notes:

Behind Counter/BOH

1. **Interior Workspace: Walls** NA Yes No
Interior Workspace: Display Details? Yes No

2. **Flooring: Tile, grout** NA Yes No
Flooring: Display Details? Yes No
3. **Messaging: Labor Poster(s), Pinkberry posters** NA Yes No
Messaging: Display Details? Yes No
4. **Organization/Storage: POS, shelves, racks, manager work station** NA Yes No
Organization/Storage: Display Details? Yes No
5. **Doors: Back room, back door, back counter** NA Yes No
Doors: Display Details? Yes No

Notes:

Outstanding Service (33%)

Scoring - 2 "No's" in any category area fails the category. Four categories per section are required for passing; must pass all sections to be in compliance.

Leading the Shift

1. **Food Safety Certified (where applicable): Managers, Shift Leaders & Team Members, food handlers cards** NA Yes No
Food Safety Certified (where applicable): Display Details? Yes No
2. **Shift Planning: People Positioning Tool, Shift readiness document, Pre-shift meeting** NA Yes No
Shift Planning: Display Details Yes No
3. **Manager Tools In Use: Daily Checklists, Line Checks, Delivery & Safe Logs** NA Yes No
Manager Tools In Use: Display Details Yes No
4. **Shift Leadership: Manager Presence** NA Yes No
Shift Leadership: Display Details Yes No

Notes:

Staffing Levels

1. **On Hand: Sufficient for peak times/day parts/ days of the week** NA Yes No
On Hand: Display Details? Yes No
2. **Trained Shift Leaders: Certified** NA Yes No
Trained Shift Leaders: Display Details? Yes No
3. **Trained Team Members: Trained** NA Yes No
Trained Team Members: Display Details? Yes No
4. **Trained General Manager: Certified** NA Yes No
Trained General Manager: Display Details? Yes No

Notes:

Team Member Service Engagement

1. **Sampling: All customers - all offerings** NA Yes No
Sampling: Display Details Yes No
2. **Team Member Profile: SHARP, Goodness Guarantee** NA Yes No
Team Member Profile: Display Details? Yes No
3. **Service Assessment: 1 per shift** NA Yes No
Service Assessment: Display Details? Yes No
4. **Recommend Toppings: At least 2** NA Yes No
Recommend Toppings: Display Details? Yes No

Notes:

Training

1. **Training Materials Available: TM training , Deployment, TM/SL materials** NA Yes No
Training Materials Available: Display Details? Yes No
2. **Certified In-Store Trainers: Minimum of 2 per store** NA Yes No
Certified In-Store Trainers: Display Details? Yes No
3. **Ongoing Forecasting: People Development/HR Needs** NA Yes No
Recommend Toppings: Display Details? Yes No

Notes:

Food Safety Standards

1. **Chemicals: Approved, stored correctly, MSDS** NA Yes No
Chemicals: Display Details? Yes No
2. **Sinks, Buckets: Prep, 3 comp, mop, santi buckets** NA Yes No
Sinks, Buckets: Display Details? Yes No
3. **Hand Safety: Hand Washing, hand sinks** NA Yes No
Hand Safety: Display Details? Yes No
4. **Employee Food: Proper storage** NA Yes No
Employee Food: Display Details? Yes No
5. **Pest Control: Professional Service** NA Yes No
Pest Control: Display Details Yes No

Notes:

Distinctive Products (33%)

Scoring - 2 "No's" in any category area fails the category. Four categories per section are required for passing; must pass all sections to be in compliance.

Yogurt

1. **Yogurt Machines Maintained: Functioning, clean; cleaned 2x/week tart; 7x/week non-tart** NA Yes No
Yogurt Machines Maintained: Display Details? Yes No
2. **Yogurt (Greek): Temp Checks, SOPs, Receiving Log** NA Yes No
Yogurt (Greek): Display Details? Yes No
3. **Yogurt (Frozen): Handling, Serving and Prep** NA Yes No
Yogurt (Frozen): Display Details? Yes No
4. **Smoothies & Shakes: Using job aids, following recipes** NA Yes No
Smoothies & Shakes: Display Details? Yes No

Notes:

Fruit Toppings

1. **Proper Spec: SOPs and Job Aids available** NA Yes No
Proper Spec: Display Details? Yes No
2. **Only Approved Products: Current layout, current labels, pre-approved substitutions** NA Yes No
Only Approved Products: Display Details Yes No
3. **Fruit (Prepped): No expired product, FIFO/allergen, proper temp range 32°-41°** NA Yes No
Fruit (Prepped): Display Details? Yes No

Notes:

Dry Toppings

1. **Topping Bar-Dry: Current layout, current labels** NA Yes No
Topping Bar-Dry: Display Details? Yes No
2. **Dry Toppings: No expired product, proper labeling/allergen** NA Yes No
Dry Toppings: Display Details? Yes No
3. **Topping Bar: Clings, Display,** NA Yes No
Topping Bar: Display Details? Yes No

4. **Product Book: Available for customer/TM review** NA Yes No

Product Book: Display Details? Yes No

Notes:

Refrigeration/Freezers

1. **Under Counter: Proper temps, gaskets, hinges, thermometers, FIFO, ice machine** NA Yes No

Under Counter: Display Details? Yes No

2. **BOH: Proper temps, gaskets, hinges, thermometers, FIFO** NA Yes No

BOH: Display Details? Yes No

3. **Display: Proper temps, gaskets, hinges, thermometers, FIFO - proper expiration labeled** NA Yes No

Display: Display Details? Yes No

Notes:

Small Wares

1. **Prep and Serving Tools: Proper utensils, knives, cutting boards, prep area** NA Yes No

Prep and Serving Tools: Display Details? Yes No

2. **Containers: Pans, buckets, lids, pitchers, measuring cups, catering equipment** NA Yes No

Containers: Display Details? Yes No

3. **Allergen: Clear and proper labeling** NA Yes No

Allergen: Display details? Yes No

4. **Blender Station: Base/motor, pitchers, prep containers** NA Yes No

Blender Station: Display Details? Yes No

Notes: