



Probationary Evaluation

Name of Employee:	_____	Banner ID Number:	_____
Department:	_____	Applicable Quarter:	_____
Supervisor:	_____	Date of Evaluation:	_____

1. Has the performance of this employee been generally acceptable? ☐ Yes ☐ No

2. Improvement is needed in area(s) or principal function(s) of:

3. In what principal function(s) does the employee demonstrate sufficient knowledge or mastery of the necessary job skills? (List specific principal function(s) and areas such as ability to get along with the public, ability to complete assignments with little or no supervision, ability to analyze problems and recommend concrete solutions, ability to type with few errors, etc.)

4. In what principal function(s) or area(s) does the employee need improvement or show insufficient knowledge or mastery of the necessary job skills? (Be specific.)

5. What are your recommendations to the employee to help improve in these areas?

4. Have you given the employee specific instructions, training and guidance (prior to this evaluation) regarding the proper use of time, method, resources, techniques, procedures, etc. needed to perform the job properly?

A. If so, what types of training/instruction have been provided and how did the employee respond?

B. If not, why?

5. Based of your efforts to help the employee adjust to and understand their responsibilities and duties, the employee should (select one):

- ☐ Move forward to the next quarter of the Probationary Period
- ☐ Be terminated due to inadequate job performance.
- ☐ Having successfully completed the required 12 month probationary period, be made a permanent employee.

Signature of Immediate Supervisor:

Signature of Employee:

Approved by (Dean or Department Head):