

Probationary Employee Performance Evaluation Form

Employee Name	First Day of Probationary Period
Job Title/Department	180th Day of Probationary Period
Department Head/Supervisor	Date of Review

1. Performance Ratings

Instructions: This section should be completed by the Department Head or Supervisor. Using the rating key below, describe the probationary employee's performance in each of the listed categories, referring to the examples listed in each category that are relevant to the employee's position. **For each category, include specific, detailed examples illustrating your rating.**

- **Exceeds expectations (3):** Consistently exceeds expectations.
- **Meets expectations (2):** Meets all relevant performance standards.
- **Needs improvement (1):** Consistently underperforms in role.
- **No basis (N/A):** Insufficient opportunity to observe or not relevant to the job.

Job Knowledge	1	2	3	N/A
Understands policies and procedures; has appropriate level of skill; proficient in area(s) of expertise necessary for job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Communication Skills	1	2	3	N/A
Has appropriate verbal and written communication skills, including, for example, presentation skills, listening skills and customer service skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Productivity and Quality of Work **1** **2** **3** **N/A**

Completes all assignments; performs work according to current guidelines and directives; pays attention to detail; produces work that matches expectations; produces work that is organized, presented professionally, thorough, complete, accurate and free of errors.

Comments:

Adaptability **1** **2** **3** **N/A**

Willingly accepts a variety of responsibilities; adapts to new situations in a positive manner; displays openness to learning and applying new skills; is resourceful.

Comments:

Professional Demeanor **1** **2** **3** **N/A**

Maintains professional appearance appropriate to the job; exhibits sound judgment; maintains a high level of character and professional attitude; has positive relationships with supervisors, coworkers, and/or subordinates

Comments:

Initiative and Creativity **1** **2** **3** **N/A**

Plans work and accomplishes tasks effectively and of own accord; acts independently while keeping supervisor informed; makes constructive suggestions; continually looks for ways to improve and promote quality; looks for opportunities to take on more responsibility; actively seeks performance feedback.

Comments:

Time Management and Reliability	1	2	3	N/A
Consistently meets deadlines; is punctual and can be relied on for planning purposes; displays effective planning and organizational skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Interpersonal Skills	1	2	3	N/A
Works well with others to achieve Township’s goals; accepts constructive criticism; reacts positively to instructions and procedures; effectively resolves conflict.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Leadership	1	2	3	N/A
Provides clear direction and purpose; models ethical workplace behavior; sets clear goals; empowers employees to achieve objectives; motivates, mentors and develops employees; displays effective decision-making skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Management	1	2	3	N/A
Maintains a safe and healthy work environment; organizes and distributes work effectively; communicates behavioral expectations and performance standards; monitors, documents and evaluates employee conduct and performance; provides appropriate and timely feedback; builds a team that reflects high morale, clear focus and group identity; encourages and provides opportunities for employee growth; promotes equal opportunity; protects the rights of all employees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

**ADDITIONAL JOB-SPECIFIC PERFORMANCE
EXAMPLES:**

1	2	3	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

3. Goals

Instructions: This section should be completed by the Department Head or Supervisor with the employee's input during the probationary employee performance review meeting.

4. Training and Development Needs

Instructions: This section should be completed by the Department Head or Supervisor with the employee's input during the probationary employee performance review meeting.

5. Probationary Employee Comments

By signing this form, you confirm that you have discussed this review in detail with your Department Head or Supervisor. Signing this form does not necessarily indicate that you agree with this evaluation.

[EMPLOYEE NAME]

Date

DEPARTMENT HEAD OR SUPERVISOR

Date