



Probation Review Form

Employee Name:

Job Title:

Grade:

Department:

Date of Joining:

Date of Meeting:

Instructions to Head of Department

These ratings will represent your evaluation of the employee's actual job performance during the probationary period. To evaluate the employee please refer to the i) job description and ii) the employee's observable and proven on-the-job performance. If the employee is rated 1 or 3, please provide supporting justification.

**1 = Improvement
Needed**

**2 = Meets
Expectations**

**3 = Exceeds
Expectations**

Knowledge of Job

Consider the level of any skills needed to perform the job.

Quantity of Work

The extent to which the employee accomplishes assigned work of a specified quality within a specified time period.

Quality of Work

Consider the extent to which the employee's work is well executed, thorough, effective and accurate.

Attendance and Reliability

The extent to which employee arrives on time and demonstrates consistent attendance; the extent to which the employee contacts supervisor on a timely basis when employee will be late or absent.

Relations with Supervisor

The manner in which the employee responds to supervisory directions and comments. The extent to which the employee seeks counsel from supervisor on ways to improve performance and follows same.

Team Work and Interpersonal Skills

Relationship with others. Consider the employee's tact, courtesy, cooperation and communication with co-workers, subordinates and customers.

SIGN OFF BY HEAD OF DEPARTMENT

Evaluation satisfactory, I recommend confirmation of employment

Evaluation unsatisfactory, I recommend this probationary employee be terminated

Name:

Signature:

Date:

SIGN OFF BY DEPUTY VICE-CHANCELLOR ACADEMIC OR ADMINISTRATIVE AFFAIRS

Support HOD recommendation (return form to HR department)

Disagree with HOD recommendation (issue will be escalated to HRC for review)

Name:

Signature:

Date: