

# **Probationary Progress Review**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Employee Name: | | | | \*Employee V-ID Number: | | | |
| Working Title: | | | | Department/Division: | | | |
| Employment Date: | | | | Projected Probation End Date: | | | |
| Review Interval: | |  | | |  | | |
| 3-month | 6-month | | Probationary Period End | | Other: |  |  |

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| **Comments on Overall Progress** - Indicate progress toward meeting performance expectations. | | | | | | | | | | | | |
| (Attachments may be added, if necessary. Indicate # of attached pages here: | | | | | |  | | ) | | | | |
|  | | | | | | | | | | | | |
| **Overall Results of Review** | | | | | | | | | | | | |
| Achiever | | Performance shows consistent achievement toward meeting established performance targets. | | | | | | | | | | |
| Fair Performer | | Performance requires improvement to meet the performance targets of core responsibilities in one or more areas. | | | | | | | | | | |
| Unsatisfactory Performer | | Performance shows deficiencies that interfere with the accomplishment of performance targets. | | | | | | | | | | |
| Probationary periodextended | The probationary period is extended for performance reasons until | | | | | | | |  | | |  |
| (MM/DD/YYYY) | | | | | | | | | | | |
| Reviewer's approval | |  | |  | | Human Resource review | |  | | |  |
| (initials) (initials) | | | | | | | | | | | |
| Employee Development Plan (Attachments may be added, if necessary. Indicate # of attached pages here: | | | | | | | | | |  | ) | |
| Personal Learning Goals: | | | | Learning Steps/Resource Needs: | | | | | | | | |

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| Supervisor’s Name *(print)*: |  |  | Title: |  | |
|  |  |  |  |  | |
| Supervisor’s Signature: |  |  | Date: |  | |
|  | | | | |
| Employee’s Signature: |  |  | Date: |  | |

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\*Contact your department’s Personnel Administrator for employee’s V-ID #