



# Unified Government Human Resources Guide

Effective: 04-01-05

## PROBATIONARY REVIEW

**Employee Name:** \_\_\_\_\_

*(as it appears on payroll records)*

**Classification:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Supervisor Phone:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Evaluation Date:** \_\_\_\_\_

**Date of Hire:** \_\_\_\_\_

### SECTION 1: DESCRIPTION OF PERFORMANCE

**Describe how well the employee has learned his/her job duties:**

**Indicate the employee's strengths:**



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Indicate the employee's areas of improvement needed:

**Overall Performance Rating:**

<b>Overall Performance Rating</b> <i>(Please mark one item to the right)</i>	<b>Exceeds Requirements*</b> <hr style="width: 80%; margin: auto;"/>	<b>Meets Requirements**</b> <hr style="width: 80%; margin: auto;"/>	<b>Does Not Meet Requirements***</b> <hr style="width: 80%; margin: auto;"/>
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- \*Exceeds Requirements:**  
*Evidence shows performance, which exceeds expectations in a superior or exemplary manner.*
- \*\*Meets Requirements:**  
*Evidence shows attainment of expected satisfactory performance.*
- \*\*\*Does Not Meet Requirements:**  
*Evidence shows performance to be below expectations or unacceptable.*

**SECTION 2: JUSTIFICATION FOR OVERALL RATING OF EXCEEDS REQUIREMENTS OR DOES NOT MEET REQUIREMENTS**  
(additional sheets and/or documentation may be added)

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**SECTION 3: PROBATIONARY COMPLETION DETERMINATION**

1. Was probationary period successfully completed?  Yes  No
- a. If yes, obtain signatures in section 4 and submit to Human Resources.
  - b. If no, see question 2. (For employees rated "Does Not Meet Requirements only")



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2. If probationary period is extended, provide justification below:

3. If extension to probation is granted, please list date in which probation ends below:

*Note: A Performance Improvement Plan must be completed for probation extensions reflecting the same ending date as indicated above. The Performance Improvement Plan should be attached to this Performance Evaluation Form.*

## SECTION 4: SIGNATURES AND APPROVALS

**Employee Comments:**

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**Employee's Signature:**

**Date:**

**Supervisor Comments:**

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**Supervisor's Signature:**

**Date:**

**Division Head Comments:**

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**Division Head's Signature:**

**Date:**

**Department Head Comments:**

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**Department Head's Signature:**

**Date:**