**UNIVERSITY LIBRARIES**

**PROBATIONARY EMPLOYEE PERFORMANCE EVALUATION**

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| --- | --- | --- | --- |
| **Employee Name** |  | **Title** |  |
| **Department** |  | **Start Date** |  |

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| ***Instructions to Evaluator***: Employees should be evaluated three times—at two months, six months, and one year. Indicate the evaluation of the employee’s job performance by writing a number between 1 and 3 on the blank line to the right of each attribute, in the appropriate column. Use the following scale: |
| 1 = Unacceptable | 2 = Needs Improvements | 3 = Satisfactory |

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| --- | --- | --- | --- |
|  | **2 Months** | **6 Months** | **Final** |
|  | **DATE** |  |  |  |
| **QUANTITY OF WORK**The extent to which the employee accomplishes assigned work of a specified quality within a specified time period |  |  |  |
| **QUALITY OF WORK**The extent to which the employee’s work is well executed, thorough, effective, accurate |  |  |  |
| **KNOWLEDGE OF JOB**The extent to which the employee knows and demonstrates how and why to do all phases of assigned work, given the employee’s length of time in his/her current position |  |  |  |
| **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 improves performance and follows same |  |  |  |
| **COOPERATION WITH OTHERS**The extent to which the employee gets along with other individuals. Consider the employee’s tact, courtesy, and effectiveness in dealing with co-workers, subordinates, supervisors, and customers |  |  |  |
| **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  |  |  |  |
| **INITIATIVE AND CREATIVITY** The extent to which the employee is self- directed, resourceful and creative in meeting job objectives; consider how well the employee follows through on assignments and modifies or develops new ideas, methods, or procedures to effectively meet changing circumstances |  |  |  |
| **CAPACITY TO DEVELOP**The extent to which the employee demonstrates the ability and willingness to accept new/more complex duties/responsibilities |  |  |  |

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| **TWO MONTH EVALUATION** |  |  |  |
|  | (Evaluator Signature and Date) |  | (Employee Signature and Date) |
| **SIX MONTH EVALUATION** |  |  |  |
|  | (Evaluator Signature and Date) |  | (Employee Signature and Date) |
| **FINAL** **EVALUATION** |  |  |  |
|  | (Evaluator Signature and Date) |  | (Employee Signature and Date) |
|  |  |  |  |
| Employee Comments (please include date; attach additional paper if necessary): |
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| Evaluator Comments (please include date; attach additional paper if necessary): |
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| TO BE COMPLETED ONLY AT LAST EVALUATION BEFORE END OF PROBATIONARY PERIOD: |
| 🞎 I recommend this probationary employee become permanent and continuous |
|  |
| 🞎 I recommend this probationary employee be dismissed before the end of the probationary period. |
|  |
| Evaluator Signature | Date |