

Probation Period Review Form

Employee Name			
Post Title			
Service Area / Section			
Date of Engagement	/	/	
Manager		Review Date	/ /

SECTION 1 - First Month Review

Objectives Set	Discussion Points / Action Agreed	Completed by:
<ul style="list-style-type: none"> ▪ ▪ ▪ ▪ 		

SECTION 2 - Monthly Review

	Improvement Required	Average	Good	Excellent
Quality and accuracy of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Efficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time keeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work relationships (team work and interpersonal and communication skills)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Performance Feedback - Outline of areas where employee is performing well against objectives and standards set:

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Where any areas require improvement give details below:

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Outline any plans to improve performance:

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Areas for Improvement		Discussion Points / Action Agreed	
<ul style="list-style-type: none"> ▪ ▪ ▪ 			
Outline the employee's views on the job, work environment and working conditions:			
			Managers Action Points:
Summary of employee's overall performance:			
Monthly Review (sign and date below)	<input type="checkbox"/>	Final Review (move onto the next section)	<input type="checkbox"/>
Employee's signature:			
Manager's signature:			
Date:	/ /		

SECTION 3

Final Month Review only

Is the employee's appointment to be confirmed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, confirmation of successful Probation Period letter to be sent to employee		
If No, give details of the concerns and schedule a Probation Period Hearing date below:		
Date of Probationary Period Hearing	/ /	
Where an extension of the probation period is determined as part of the Probationary Period Hearing, Section 2 Monthly Review of the Probation Period Review Form must be completed on a monthly basis to review progress.		

Employee's signature:	
Manager's signature:	
Date:	/ /

Once completed, please return to: Employment Services, Room 114w, Civic Centre.