

Introductory Period – 90 Day Evaluation (Form)

Employee: _____ Date: _____

Position: _____ Hire Date: _____

Review Period: _____ to _____

Supervisor: _____ Rating: _____

Next Review Date: _____

Development Plan

E. Employee Development Plan and Training:

F. Employee's Comments:

G. Reviewer's Comments:

H. Growth potential in present position and future growth potential for
Increased responsibilities:

Acknowledgement

Employer's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Note: Job Description to be attached for Evaluation reference.