

6-Month Probation Evaluation

Employee Information

Employee Name

Job Title

Department

Manager/Supervisor

Evaluation Date

Performance Evaluation

1. Quality of Work

2. Productivity

3. Communication Skills

4. Attendance/Punctuality

5. Teamwork & Collaboration

6. Initiative & Problem Solving

Summary Comments

Overall Comments

Strengths

Areas for Improvement

Evaluation Outcome

Outcome

Manager/Supervisor Signature

Date

Employee Comments (optional)

Employee Signature

Date