

Employee Probation Assessment Form

Employee Information

Employee Name

Job Title

Department

Supervisor

Start Date

Assessment Date

Assessment Criteria

Criteria	Rating	Comments
Quality of Work	<div></div>	<div></div>
Punctuality & Attendance	<div></div>	<div></div>
Teamwork	<div></div>	<div></div>
Communication Skills	<div></div>	<div></div>
Initiative & Learning	<div></div>	<div></div>

Summary & Recommendation

Overall Performance Summary

Recommendation

Signatures

Supervisor Name & Signature

Employee Name & Signature