

Employee Probationary Evaluation Form

Employee Name

Position/Title

Department

Evaluator Name

Date

Probation Period

e.g. 3 months

Performance Criteria

Criteria	Rating (1-5)	Comments
Quality of Work	<input type="text"/>	<input type="text"/>
Quantity of Work	<input type="text"/>	<input type="text"/>
Punctuality & Attendance	<input type="text"/>	<input type="text"/>
Work Attitude	<input type="text"/>	<input type="text"/>
Teamwork & Cooperation	<input type="text"/>	<input type="text"/>
Communication Skills	<input type="text"/>	<input type="text"/>
Dependability	<input type="text"/>	<input type="text"/>

General Comments

Evaluator's general observations and comments

Recommendation

Select an option



Additional Recommendation Comments

Evaluator's Signature

Date

Employee's Signature

Date