

WELLESLEY COLLEGE

Introductory Period Report

DATE _____

TO:

FROM: Office of Personnel

Employee Name _____ Date of Hire _____

Department _____

Position _____

The above mentioned employee is in her/his 90 day introductory period until _____

Please evaluate the employee's performance in the following areas as well as any other areas that are appropriate. Both supervisor and employee signatures are required.

1. Quality of Performance _____

2. Accomplishments /Quantity of Work _____

3. Job Knowledge _____

4. Interpersonal Skills _____

5. Cooperation _____

6. Initiative _____

7. Dependability _____

8. Attendance _____

Additional Comments _____

Supervisor's recommendations for continued employment:

- Completed 90 day introductory period
- Introductory period extended _____ days
- Termination

Employee Comments: _____

(Supervisor's Signature)

(Date)

(Employee's Signature)

(Date)