TO:					
FROM					
DATE					
RE:					
NAME OF EMPLOYEE:					
TITLE OF EMPLOYEE:					
POSITION:					
TRAINING PERIOD	□ 30-DAY	□ 60	0-DAY		
The above-named employee completed the —-day training period for the position of ——. My overall assessment of the employee's performance during this period is as follows::					
wy overali assessifient of the en	pioyee's perio		g triis period is a	S follows	
QUANTITY OF WORK-The employee consistently produces work	☐ Exceeds	☐ Standard	☐ Satisfactory	☐ Below Standard	☐ Unacceptable
of the required quality while adhering					
to agreed-upon deadlines. QUALITY OF WORK - Employee	☐ Exceeds	☐ Standard	☐ Satisfactory	☐ Below Standard	☐ Unacceptable
performance demonstrates	LXCCCGS		_ Gallolactory	Delow Standard	Ondoceptable
well-executed tasks, marked by accuracy, completeness, and					
effectiveness.					
KNOWLEDGE OF JOB - The employee demonstrates knowledge of	☐ Exceeds	☐ Standard	☐ Satisfactory	☐ Below Standard	☐ Unacceptable
and proficiency in all phases of					
assigned work, appropriate to their tenure in the position.					
RELATIONS WITH SUPERVISOR –	☐ Exceeds	☐ Standard	☐ Satisfactory	☐ Below Standard	☐ Unacceptable
The employee proactively seeks guidance from the supervisor to					
enhance performance and applies the					
feedback received. COOPERATION WITH OTHERS	☐ Exceeds	☐ Standard	☐ Satisfactory	☐ Below Standard	☐ Unacceptable
The employee maintains positive					
working relationships with colleagues and supervisors, demonstrating tact,					
courtesy, and effective					
communication. ATTENDANCE AND	☐ Exceeds	☐ Standard	☐ Satisfactory	☐ Below Standard	☐ Unacceptable
RELIABILITY – The employee maintains punctuality and reliable					
attendance, notifying the supervisor					
promptly in case of lateness or absence.					
			l		
COMMENTS:					
Signature of Supervisor			Date		
I acknowledge that I have reviewed and understand this training period evaluation.					

Signature of Employee REVISED: 08/22/25