MANCHESTER COLLEGE
90 DAY
NEW EMPLOYEE EVALUATION

IMPORTANT: Please return this form to the Human Resources Office

Employee name: ___________________________ Date: ___________________________

Job Title: ___________________________ Date Employed: ________________

SUPERVISOR’S RATING:
Please Evaluate and Rate Each of the Qualities Listed Below:

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<thead>
<tr>
<th></th>
<th>Satisfactory</th>
<th>Unsatisfactory</th>
<th>Unable to Rate</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Attendance/Punctuality</td>
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<td>Safety</td>
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<td>Job Knowledge</td>
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<td>Quality of Work</td>
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<td>Quantity of Work</td>
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<td>Co-operation with Others</td>
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<td>Relations with Supervisor</td>
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SUPERVISOR’S RECOMMENDATIONS:

1) In comparison with other employees performing similar job functions and with the same length of service, how would you rate this employee?

   ____ Outstanding   ____ Above Average   ____ Fair   ____ Unsatisfactory

2) Do you recommend extending the probationary period? ____Yes   ____No
   If YES, please check the appropriate line:      ______30 days _______60 days

(Please turn over)
3) Do you recommend the probationary employee be retained as a regular employee?  
   ______ Yes  ______ No  
If NO, please specify the reasons why he/she should not be retained. Provide as much detail as possible.
________________________________________________________________________
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Employee’s Signature ______________________ Date _________________
Supervisor’s Signature _____________________ Date _________________
Reviewed and Approved by _________________ Date _________________