**Probationary Period of New Hire**:

**From**  Click or tap to enter a date. **To** Click or tap to enter a date.

**Date of Evaluation Meeting**:

Click or tap to enter a date.

|  |  |
| --- | --- |
| **Name Employee Name (Last, First):** | **Employee Number**: |
| **Position/Job Title**: | **Date of Hire / Transfer / Promotion:** |
| **Supervisor Name**: | **Training Completed (check the one that applies)**:  Police Academy only  Field Training only  Academy and Field  None Required |

**PURPOSE**

The purpose of this probationary evaluation is as a tool to encourage frequent two-way conversations between the supervisor and employee regarding progress, underscore the expectations of the position, maximize the employee’s opportunity to become a successful performer, and determine next steps towards the employee’s employment future. This tool is to be used for new hire employees, but is to also be used for employees who move to a new position, whether as a transfer to another position or promotion.

**TO THE SUPERVISOR**

* The evaluation will be considered confidential and should be discussed in detail with the employee.
* For the employee, supervisor, and the University to gain the most from this tool, supervisors are highly encouraged to take advantage of the evaluation form with iterative performance meetings to better engage with the employee.
* Please complete and submit the final end of probation form to Human Resources by clicking [HERE](https://nku.co1.qualtrics.com/jfe/form/SV_3E4E64PKdnbJt9c).
* The iterative evaluations are not required to be sent to HR **unless** there is a performance problem documented.

**PART I: EMPLOYEE REVIEW**

|  |  |
| --- | --- |
| **Question** | **Employee Comment** |
| 1. What accomplishments, this evaluation period, are you most proud of? |  |
| 2. What personal strengths enabled you to reach those accomplishments? |  |
| 3. What has been most challenging for you in this position? Any barriers? |  |
| 4. How can your supervisor (and team) better support you becoming successful in your position? |  |

**PART II: SUPERVISOR REVIEW**

|  |  |  |  |
| --- | --- | --- | --- |
| **Job Performance Factor and Description** | **SUPERVISOR Rating and Comment** | | |
| **A. Productivity**  (e.g. demonstrates commitment to producing work that meets departmental standards/goals, ensures consistency and accuracy in result/output, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| **B. Initiative**  (e.g. shows great energy in tackling challenges related to assigned tasks, demonstrates accountability for own learning, works well without any supervision, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| **C. Dependability**  (e.g. demonstrates satisfactory attendance, reports to work and meetings as scheduled, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| **D. Cooperativeness**  (e.g. works well with others, willingness to share expertise and information with others, demonstrates a collaborative aptitude, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| **E. Adaptability**  (e.g. constructively acts and adjusts due to feedback or change, performs under pressure, handles multiple assignments, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| **F. Compliance / Safety**  (e.g. speaks up about all risks of harm, adheres to all safety guidelines, participates in all mandatory training, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| **G. Diversity, Equity, & Inclusion**  (e.g. encourages and contributes to a work environment that is welcoming to all, treats all individuals with courtesy, dignity, and respect, etc.) | Meets  Does Not Meet (please check one box) | Not Observed |  |
| 1. **Overall Rating**   (please check one box)  Employee successfully meets or exceeds requirements.  Employee fails to meet probationary job requirements.     * 1. **Comments**   All ratings of “does not meet” requires comments; Add what employee should work towards for next evaluation.     1. **Recommendation** (please check one box)   ***Note: If probation period not selected as completed, please provide documentation.***  Recommend completion of probation period.  Recommend Choose an item. - day extension of probation period for additional observation time.  Recommend employee be terminated (must be approved by HR Employee Relations). | | | |

**PART III: SIGNOFFS**

Employee: (1) I have read and discussed this evaluation with my supervisor.

(2) I realize that if I wish to do so, I may submit a written statement about this evaluation to the Human Resources Department within five (5) days of this date.

|  |  |  |  |
| --- | --- | --- | --- |
| Supervisor’s Signature: |  | Date: | Click or tap to enter a date. |
| Employee’s Signature: |  | Date: | Click or tap to enter a date. |

**Please submit the completed and signed form at the end of probation**

**to Human Resources by clicking**[**HERE**](https://nku.co1.qualtrics.com/jfe/form/SV_3E4E64PKdnbJt9c)