

Probationary Progress Review

Projected Probationary End Date:

Review Interval
 3-month 6-month Probationary Period End Other:

Employee Name (Last, First, Middle)	Employee ID Number
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Position Number	Role Title	Work Title
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Agency	Sub-Division
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Employment Date	Supervisor's Name	Supervisor's Title	Supervisor's Position Number
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Comments on Overall Progress (Indicate progress toward meeting Performance Plan. Attachments may be added if necessary. Indicate # of attachments here:

Overall Results of Review

Contributor Performance shows consistent achievement toward meeting established performance expectations.

Below Contributor Performance shows deficiencies which interfere with the attainment of performance expectations.

Probationary Period Extended In accordance with the Policy 1.45, the probationary period is extended for performance reasons until

Employee Development Plan (Attachments may be added if necessary. Indicate # of attachments here:

Personal Learning Goals	Learning Steps/Resource Needs

Supervisor's Signature:	Date:
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Employee's Signature:	Date:
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