



90-DAY PERFORMANCE EVALUATION

**THIS FORM IS TO BE USED TO EVALUATE A NEW EMPLOYEE'S PERFORMANCE
DURING THE FIRST NINETY (90) DAYS OF EMPLOYMENT.**

Employee: _____ **Date:** _____

Department: _____ **Date of Hire:** _____

Title: _____ **Evaluation Period:** _____

EXCELLENT: Employee's performance significantly exceeds the required essential functions and job duty requirements.
 VERY GOOD: Employee's performance exceeds the required essential functions and job duty requirements.
 GOOD: Employee's performance meets the required essential functions and job duty requirements
 FAIR: Employee's performance needs improvement in the required essential functions and job duty requirements.
 UNSATISFACTORY: Employee's performance falls below the required essential functions and job duty requirements.

GENERAL PERFORMANCE FACTORS	EXCELLENT	VERY GOOD	GOOD	FAIR	UNSATISFACTORY
1. QUALITY OF WORK - Completeness; accuracy; professionalism or technical proficiency					
2. WORK HABITS - Planning and organization of work; care of equipment and supplies.					
3. RELATIONSHIPS WITH SUPERVISOR AND OTHERS - Responsiveness to supervisor's instructions and suggestions, ability to get along with peers and customers					
4. DEPENDABILITY - Degree to which employee can be relied upon to work steadily and effectively; punctuality; regularity of attendance					
5. QUANTITY OF WORK-Amount of work performed					
6. INITIATIVE- Resourcefulness; originality; ability to make improvements to programs, projects and systems within authority level					
7. ANALYTICAL ABILITY-Ability to analyze work and properly plan and prioritize work using department procedures and guidelines available					
8. OVERALL EVALUATION					

Immediate Supervisor's Comments (Continue on additional sheets of 8.5 x 11 white paper.)

Employee's Comments (Continue on additional sheets of 8.5 x 11 white paper.)

MENTOR'S SIGNATURE

TITLE

DATE

I ACKNOWLEDGE THAT I HAVE READ THIS REPORT AND THAT I HAVE BEEN GIVEN AN OPPORTUNITY TO DISCUSS IT WITH THE EVALUATOR. MY SIGNATURE DOES NOT NECESSARILY MEAN THAT I AGREE WITH THE REPORT.

EMPLOYEE SIGNATURE _____

DATE _____