UNIVERSITY AT ALBANY
State University of New York

PROBATIONARY PERFORMANCE EVALUATION

NAME_____DEPARTMENT _____SUPERVISOR_____

TITLE_____ GRADE_____ DATE OF PERMANENT APPOINTMENT TO TITLE _____

IMPORTANT: Check appropriate rating and include comments supporting evaluation. Comment specifically for ratings of "Outstanding" or "Unsatisfactory." (See Probationary Performance Evaluation Cover Sheet)

	OUTSTANDING	EFFECTIVE	UNSATISFACTORY
FACTORS	Consistently exceeds all performance expectations.	Usually meets and sometimes exceeds performance expectations.	Below expected standards. Immediate and significant improvement required.
QUALITY			
Accuracy Neatness Thoroughness	Comments		
QUANTITY			
Amount Effort	Comments		
PERSONAL TRAITS			
Attendance Conduct Dependability	Comments		
ATTITUDE			
Initiative Enthusiasm Cooperation	Comments		

REMARKS --- Comment as Appropriate: Other factors you feel important, i.e.,

..... Tasks employee does best _____

..... Tasks employee does least well_____

..... Potential_____

_____

_____

RECOMMENDED ACTION:

Confirm Permanent _____
Extended Period To:
Maximum _____
Other _____
Terminate _____

_____	_____	_____	_____
Appraised by	Date	Signature of Employee	Date reviewed with employee