THE UNIVERSITY OF ALABAMA

Introductory Period Performance Evaluation
For Exempt and Non-Exempt Staff

Employee Name: _____ CWID: _____
(First) (Last)
Department Name: _____ Dept. Code: _____

Period of Evaluation: From: _____ To: _____

The first six (6) months of employment is considered an introductory period for employees. During this time period, employees have the opportunity to demonstrate their ability and probability of sustained successful performance. Either the supervisor or the employee may terminate the employment relationship with or without notice during the introductory period. Please complete this form (and the Extended Introductory Period form, if applicable) and return form(s) to the Department of Human Resources, Box 870126, 303 Rose Administration Building.

The immediate supervisor should check one of the following blocks.

( ) The performance of the above named employee has been satisfactory and the introductory period has been successfully completed.

( ) The performance of the above named employee needs improvement in some areas and the introductory period is extended to _____ (date). (The introductory period can be extended only **one time** and is usually for an additional 30, 60 or 90 days. Please contact Employee Relations at 348-8213 for assistance prior to completing the Extended Introductory Period Form.)

( ) The above named employee has not demonstrated satisfactory performance during the introductory period and termination of employment is recommended.

REASON(S) FOR TERMINATION:

_____
_____
_____
_____

_____ _____
Supervisor's Signature Date

_____ _____
Reviewing Official's Signature Date

_____ _____
Employee's Signature Date

Employee's Comments: _____
_____
_____

Revised 10/05

EXTENDED INTRODUCTORY PERIOD FORM

Employee Name: _____ SSN: _____
(First) (Last)
Department Name: _____ Dept. Code: _____

Period of Evaluation: From: _____ To: _____

List below the specific job performance issues that are unsatisfactory and must be improved during this extension period. Include specific goals/objectives along with timeframes. If these improvements are not made or if there are continued concerns at any time during this introductory period extension, the employee may not be retained in this position. A copy of this form should be kept in departmental files so it can be used to assist in evaluating job performance at the end of the extended review period.

JOB PERFORMANCE CONCERNS AND IMPROVEMENTS REQUIRED
(GOALS/OBJECTIVES AND TIME FRAMES FOR ACCOMPLISHMENT.)

1. _____

_____

_____

2. _____

_____

_____

3. _____

_____

_____

4. _____

_____

_____

Supervisor's Signature: _____ Date: _____

Employee's Signature: _____ Date: _____