

## **INTERVIEW ASSESSMENT FORM**

(FOR PROBATIONER AND STAFF UNDER CONTRACT)

**\*\* Please tick ( / ) whichever is applicable**

Confirmation of Employment / Competency Assessment

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Absorption Into Permanent

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Employment

### **Employee Particular**

<b>Employee Name and Number :</b>	<b>Commencement Date :</b>
<b>Position :</b>	<b>Length of probationary period / contract :</b>
<b>Company / Department :</b>	<b>Qualification :</b>
<b>Immediate Superior :</b>	<b>Job Grade :</b>

No	Assessment	Comments
1	Knowledge on scope of work / job responsibilities	
2	Attention to company's policies and procedures	
3	Involvement in teamwork/effort	
4	Personal achievements	
5	Work challenges and problem solving skill	

**INTERVIEW ASSESSMENT FORM**

**Conclusions From Panel :**

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Recommendation for confirmation	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No

Recommendation for permanent employment	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No

If NO, please state the reasons and period of extension

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Signature : .....  
Name : .....  
Date : .....