AUSTRALIAN AUTOMOTIVE GROUP PROBATIONARY PERIOD ASSESSMENT FORM

	A 0 1 '			\cap	. (11			
Employee Full Name	folam Vihnicoi	Mbe Site Locati	on	Castle	2 Hill			
Employee Position 1St yr Affrent, Cl			gers Name	Carin miles				
Employee Start Date	28-3-19.	Site Mana	gers Job Title	1/4	(
Automotive Group's assessmen	clist and recommendations are to b nt in determining whether or not th ed in legal proceedings where my a	e employee named above wil	have their employr	nent terminated.	I understand t	his docume	nt is private	
Criteria				por Passable	Average 3	Good 4	Excellent 5	
1 What level of job knowledge does the probationer have?								
2 How good is the probationer's quality of work?					I	I		
3 How is the probationer's time management skills?								
4 How is the probationer's hygiene and overall appearance?							T	
5 How well does the probationer follow safe work procedures and safety rules?								
6 What level of initiative does the probationer show (e.g. are they a self-starter)?					1		3	
7 How well does the probationer follow instructions?			100				1	
8 How well does the probationer follow company policies?					1	7	T	
9 How punctual is the probationer?			Į.	7			1	
.0 How well does the probationer cooperate with managers?			T					
11 How well does the probationer work with staff generally?			100		1			
12 How good an attitude does the probationer display towards their job?					I	Í	J	
13 How good an attitude does the probationer display towards AAG as a whole?			nole? ,				-	
been und has not t	able to assessee at work	long enough	tability - to mal requiren	for the we an of	rble gective score =	Secar ass	esnei	
of the pr	obation peri	ol.						
		Substandard but making						
Manifestly Substandard	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Average		Above Average		Outstanding	
I confirm that over the cours informal basis. In my conside The employee should terminated with notice. Print Name Signature		nd AAG undertake the follo uld have their suitability i in () months	wing course of act	ion against the e he employee sl	employee na nould be off oon as pract	med above ered empl		
AAI	g probationary period asses	SMENT FORM – UNCONTRO	LLED WHEN PRINT	ed hr form 3	2 REV 1	*		