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| **Employee Performance Appraisal Form** | | | | |
| Projected Probationary End Date: | | | |  |
| Review Interval  3 Months  6 Months  Annual  Other: | | | | |
| Employee Name (Last, First, Middle)  Pavithra Shambhu Shetty | | Employee ID Number  **DRN/0129** | | |
| Title  **Tax** | | Role Title  **Senior -Tax Search** | | |
| Department  **Operations** | | Sub-Division  **Tax Search** | | |
| Employee’s DOJ  03/08/2015 | Supervisor’s Name  Kiran Logan | | Supervisor’s Title | |
|  | Evaluator's Name | | Evaluator's Title | |

**Section A : for the Evaluator to complete**

*Instructions to Evaluator:* The Supervisor or direct line manager of the employee is normally also the evaluator. Only in exceptional circumstances, for example, due to interpersonal conflict or non-availability of the line manager, should an evaluator (other than the supervisor) be appointed. Evaluators should refer to the employee's job description when completing this form; the evaluation should focus on the employee's ability to perform the job duties listed in the job description. Indicate the evaluation of the employee's job performance by writing a number between 1 and 5 on the blank line to the right of each attribute, in the appropriate column. Use the following scale:

1 = Below Average; 2 = Satisfactory; 3 =Good; 4 = Very Good; 5 = Excellent

|  | 3 Months\* | 6 Months\* | Annual |
| --- | --- | --- | --- |
| date |  |  |  |
| QUANTITY OF WORK  The extent to which the employee accomplishes assigned work of a specified quality within a specified time period |  |  | 4 |
| QUALITY OF WORK  The extent to which the employee's work is well executed, thorough, effective, accurate |  |  | 4 |
| KNOWLEDGE OF JOB  The extent to which the employee knows and demonstrates how and why to do all phases of assigned work, given the employee's length of time in his/her current position |  |  | 3.5 |
| RELATIONS WITH SUPERVISOR  The manner in which the employee responds to supervisory directions and comments. The extent to which the employee seeks counsel from supervisor on ways to improves performance and follows same |  |  | 4 |
| COOPERATION WITH OTHERS  The extent to which the employee gets along with other individuals. Consider the employee's tact, courtesy, and effectiveness in dealing with co-workers, subordinates supervisors, and customers |  |  | 5 |
| ATTENDANCE AND RELIABILITY  The extent to which employee arrives on time and demonstrates consistent attendance; the extent to which the employee contacts supervisor on a timely basis when employee will be late or absent |  |  | 4 |
| INITIATIVE AND CREATIVITY  The extent to which the employee is self- directed, resourceful and creative in meeting job objectives; consider how well the employee follows through on assignments and modifies or develops new ideas, methods, or procedures to effectively meet changing circumstances |  |  | 3 |
| CAPACITY TO DEVELOP  The extent to which the employee demonstrates the ability and willingness to accept new/more complex duties/responsibilities |  |  | 4 |

**Section B: This section must be completed by the Supervisor only:-**

Describe your new employee's performance / conduct.

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Does this employee demonstrate the expertise and general skill level you expected based on the job application and interview? ❑ Yes ❑ No

If no, in what way does this employee’s performance differ from your expectations?

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Do you consider this employee to be making progress appropriate to their length of employment?

❑ Yes ❑ No

If no, please describe the areas that need improvement?

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Have you made arrangements for the employee to receive additional training?

❑ Yes ❑ No

If yes, what training? Where conducted?

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Have you spoken to the employee about areas of concern at any time other than during this probationary review?

❑ Yes ❑ No

If yes, what was the employee’s reaction to the discussion?

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What goals have you and this employee set for the next few weeks/ months on the job?

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Does it seem probable that this employee will satisfactorily complete the probationary period?

❑ Yes ❑ No

If no, please explain.

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Any additional comments or concerns?

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Recommended Action

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| Type of Training | Examples for a call centre employee (please edit according to internal requirements) |
| On-the-job | e.g. re-do module 2 of customer service training course |
| Classroom | e.g. Attend company customer service training course |
| External | e.g. attend Call Centre software training course |
| "Buddy" training | e.g. place employee on same roster as Sr. Title processors (most experienced call centre employee) |
| Appoint mentor | e.g. appoint supervisor, as mentor for duration of probationary period to familiarize employee on customer service requirements |

**Recommended measures**

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| --- | --- |
| Action |  |
| Reason |  |
| Responsible Person |  |
| By When |  |

|  |  |
| --- | --- |
| Action |  |
| Reason |  |
| Responsible Person |  |
| By When |  |

Evaluator Comments (please include date; attach additional paper if necessary):

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Recommendations by Supervisor / Evaluator:-

Should the employee's probationary period be extended: ❑ Yes ❑ No

Period required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason : (explain benefit to employee and company for extending the probationary period, for example, what skills would be acquired by the employee through the extension of the probationary period itself):-

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TO BE COMPLETED ONLY AT LAST EVALUATION BEFORE END OF PROBATIONARY PERIOD:

🞏 I recommend this probationary employee become permanent and continuous.

🞏 I recommend that disciplinary action be taken against this probationary employee before the end of the probationary period and will submit the appropriate forms.

🞏 I recommend this probationary employee's probationary period be extended by a further \_\_\_\_\_ weeks / months. Note:- An employer may only decide to dismiss an employee or extend the probationary period after the employer has invited the employee to make representations and has considered any representations made.

🞏 Employee resigned before completion of probationary period. (It is important that the HR Department receive this form even if employee has resigned.)

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| *Comments to Evaluator and Employee.* Evaluators should discuss the evaluation results with the employee. At a minimum, employees must be given a copy of the evaluation for their own records. Both the evaluator and the employee should sign the evaluation form. The employee signature indicates only that the employee received a copy of the evaluation. It does not necessarily signify employee concurrence. Both employees and evaluators are strongly encouraged to include written comments. |

3 MONTHS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EVALUATION (Evaluator Signature and Date) (Employee Signature and Date)

6 MONTHS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EVALUATION (Evaluator Signature and Date) (Employee Signature and Date)

ANNUAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EVALUATION (Evaluator Signature and Date) (Employee Signature and Date)

DEPARTMENT HEAD & SIGNATURE HR HEAD & SIGNATURE

Copies of this evaluation must be placed on the employee's personnel file.