

**TRINITY UNIVERSITY**  
**New Employee Appraisal Form**  
**(Orientation/Probationary)**

CHECK ONE:      ☐ 2 Month Review (60 days)      ☐ 5 Month Review (150 days)  
                         ☐ Other (specify time period) \_\_\_\_\_

Employee's Name \_\_\_\_\_ Date Employed \_\_\_\_\_

Job Title \_\_\_\_\_ Date of Appraisal \_\_\_\_\_

Department \_\_\_\_\_

In determining the employee's suitability for continued employment, the immediate supervisor should provide the information requested below:

CHECK THE APPROPRIATE BOX:

- |  |                          |
|--|--------------------------|
| 1. Employee is making satisfactory progress        | <input type="checkbox"/> |
| 2. Employee is making progress with qualifications | <input type="checkbox"/> |
| 3. Employee is not making satisfactory progress    | <input type="checkbox"/> |
| 4. Employee is to be released due to poor progress | <input type="checkbox"/> |

Comments and/or actions to be taken:

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Employee's comments:

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Evaluated by:

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\*-your signature on this form indicates you have received a copy of this form and have discussed its contents with your evaluator. It does not necessarily indicate agreement with the evaluator's comments.

**Distribution: white-employee, yellow-department, pink-human resources**

Revised 10/02

