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| **Type of Evaluation**  Probationary Review Performance Improvement Annual  Other Click or tap here to enter text. | | | Performance Period  From Click or tap to enter a date. To Click or tap to enter a date. |
| Employee Last Name  Click or tap here to enter text. | | Employees First Name  Click or tap here to enter text. | Employee Middle Initial  Click or tap here to enter text. |
| Employee Personnel Number  Click or tap here to enter text. | | Job Title  Click or tap here to enter text. | |
| Evaluator’s Name and Position  Click or tap here to enter text. | | | |
| 1. **Interim review**   This section is used during the performance review period to adjust performance and expectations if circumstances changes and to document interim feedback for performance improvement. | | | |
| Click or tap here to enter text. | | | |
| 1. **Performance Review**   Provide a narrative assessment of the employee’s performance in relation to the main results and competencies expectations set upon hire. | | | |
| Review: How did the employee accomplish the expected main results and how well were they completed?  Click or tap here to enter text. | | | |
| Review: How did the employee accomplish the expected competencies and how well were they completed?  Click or tap here to enter text. | | | |
| Review: How did the employee demonstrate Trouves Health Care Corporation’s vision, mission and values during this review period?  Click or tap here to enter text. | | | |
| 1. **Employee Goals**   This section is used by the employee to express their professional goals and areas they would like to grow. | | | |
| Click or tap here to enter text. | | | |
| **Acknowledgement of Performance Evaluation**  The signature below indicates that the supervisor and employee have discussed the content of this evaluation. | | | |
| Date  Click or tap to enter a date. | Evaluator’s Signature  Click or tap here to enter text. | | |
| Date  Click or tap to enter a date. | Employee’s Signature  Click or tap here to enter text. | | |
| Note: This is to be completed annually or when expectations and job duties change and performance improvement is needed. The supervisor provides a copy to the employee and the original is placed in the employee’s personnel folder. | | | |