

## Appendix 2: Cumberland Council Assessment of Probationary Period in Employment

**CONFIDENTIAL:** when completed forward to the HR, Payroll and Recruitment Admin via the **HR**, **Payroll and Recruitment Admin portal** or to the HR/payroll provider, to be placed on the employee's personal file.

To be completed at each of the 12 week and 20 week review meetings.

Name	Job title	
Directorate/School	Work location	
Unit/Dept	Name of line manager	
Date appointed	Name of appraiser	(if different to above)

## 1. Assessment

Areas Assessed	Comments of Line Manager	Comments of Employee
1. Quality of work		
<ul><li>2. Effectiveness of communication</li><li>3.</li></ul>		



3. Working with people		
4. Customer services		
5. Initiative and problem solving		
6. Employee's Progress: a) Strengths and successes		
b) Areas for further improvement		
Areas Assessed	Comments of Line Manager	Comments of Employee
c) Obstacles preventing progress (if any)		Comments of Employee
c) Obstacles preventing		Comments of Employee
c) Obstacles preventing progress (if any)  7. Attendance and		Comments of Employee



10.Gen	eral Comments					
2. Overall comments of Line Manager						
*a) I am satisfied with this employee's progress to date OR						
*b) I have reservations about this employee's progress and wish to discuss this further (see attached action to be taken)						
Line Manager Date						
3. Overall comments of Employee						
I declare that I have seen the above report and have been given the opportunity to discuss the contents						
Employe	ee		Date			
* Delete as appropriate						