

MID-POINT PROBATIONARY REVIEW

Name: _____ Position: _____

Start Date: _____ Union: _____ Date Reviewed: _____

Supervisor Overview/Comments:
Strengths:
Areas for Development:
Developmental Plan:
Employee Comments:

<i>Employee Signature</i>	<i>Date</i>
<i>Supervisor's Signature</i>	<i>Date</i>

Provide a copy of the completed MID-POINT PROBATIONARY REVIEW to the employee and return the original to Human Resources