



30-90 Evaluation for Employees in a New Position

Employee Name: Cheri Lucius	Department: Commissary
Job Title: QA	Hire Date: 10/7/14
Supervisor: Rhonda Breuer	Evaluation Period: 30 Day Evaluation

Tasks	Criteria	Acceptable	Needs Improvement	Not-Acceptable
Attendance	• Reports for all scheduled shifts at the scheduled start time	☒	☐	☐
	• Notifies supervision in advance if unable to report to work as scheduled	☒	☐	☐
Communication	• Effectively exchanges information, written or verbal, with all types of personnel	☒	☐	☐
	• Communicates information accurately, timely, and respectfully	☒	☐	☐
Job Skills and Ability to Learn	• Able to grasp new concepts and applies them to the job	☒	☐	☐
	• Demonstrates technical understanding of the job	☒	☐	☐
	• Asks questions to confirm understanding of concepts	☒	☐	☐
Work Quality and Ability to Follow Work Instructions	• Operates systems and equipment properly	☒	☐	☐
	• Follows work procedures	☒	☐	☐
	• Amount of rework minimal	☒	☐	☐
	• Follows through on tasks	☒	☐	☐
Safety and QA-Food Safety Awareness	• Follows all Safety policies	☒	☐	☐
	• Watches out for others	☒	☐	☐
	• Follows all QA & Food Safety Awareness policies & procedures	☒	☐	☐
Team Work and Initiative	• Able to get along with others and help them complete tasks	☒	☐	☐
	• Does work without being constantly reminded	☒	☐	☐
	• Fits into the norms and expectations of the organization.	☒	☐	☐

Please answer the following questions below:

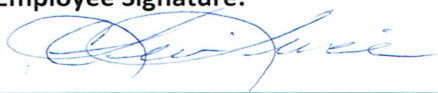
Employee	Supervisor
Are additional resources/tools needed? <i>Computer issues resolved.</i>	Have additional resources/tools that the employee requested been provided?
Are there any barriers or obstacles to successfully perform the work? <i>Delayed computer access & computer issues caused some challenges</i>	If obstacles or barriers exist, what has been done to eliminate them? <i>Working with IT to get issues resolved.</i>

For Employees at their 30-Day and 90-Day milestone, please mark one:

- ☒ Employee is making progress and meeting performance expectations
☐ Employee is not making progress and is not meeting performance expectations

Supervisor Comments <i>(If Not-Acceptable is marked for any Task, specific examples must be provided)</i>
Employee Comments

This Evaluation has been reviewed with me on this date.

Employee Signature: 	Date: <i>11/18/2014</i>
Supervisor Signature: 	Date: <i>11/18/14</i>