

PAYROLL CHANGE REPORT

Today's Date:	<u>11/1/2016</u>	Effective Date:	<u>10/31/2016</u>
Hire Date:	<u>3/23/2015</u>	Hours Worked:	<u>1040/6 month</u>
Employee's Name:	<u>Chame Olethe</u>		
Department:	<u>Flow Wrap</u>		

CHANGE (S)		FROM	TO
X	Rate	\$9.75	9.75
	Shift Differential		-
	Total	\$9.75	\$9.75

REASON (S) FOR THE CHANGE (S)						
Seniority Increase (Circle One)	480 HRS	6 Month	1 Year	1 1/2 Year	2 Year	Annual
Merit Increase (level 2)						
Other						

ADDITIONAL COMMENTS

No change due to attendance

Authorized by:		Date:	<u>10/31/16</u>
Guideline verified:		Date:	<u>10-31-16</u>
		Date:	<u>10/31/16</u>

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"your workforce management & staffing experts"

3month/6month Evaluation

Employee Name: <u>Chame Olthe</u>	Department: <u>Flow wrap - 2nd</u>
Job Title:	Hire Date: <u>3-23-15</u>
Supervisor: <u>Matt Heaton</u>	Evaluation Period: <u>6mon</u>

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

Please answer the following questions below:

Employee:	Supervisor:
Are additional resources/tools needed? <i>No</i>	Have additional resources/tools that the employee requested been provided?
Are there any barriers or obstacles to successfully perform the work? <i>No</i>	If obstacles or barriers exist, what has been done to eliminate them?

For Employees at their 3 month and 6 month 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> <i>Good Worker</i>
Employee Comments

This Evaluation has been reviewed with me on this date.

Employee Signature:	Date:
Supervisor Signature: <i>[Signature]</i>	Date: <i>11-7-16</i>

*NO raise due to Attendance.
Sick day is no more than 8 days in
a year or 4 in 6 months.*