

Please answer the following questions below:

Employee	Supervisor
Are additional resources/tools needed? <p style="text-align: center;">NSD</p>	Have additional resources/tools that the employee requested been provided?
Are there any barriers or obstacles to successfully perform the work? <p style="text-align: center;">NSD</p>	If obstacles or barriers exist, what has been done to eliminate them?

**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

<p><b>Supervisor Comments</b>  <i>(If Not-Acceptable is marked for any Task, specific examples must be provided)</i></p> <p>Kah has performed very well in all tasks assigned and shows good skill in production flow and efficiency. Very proactive on floor.</p>
<p><b>Employee Comments</b></p>

*This Evaluation has been reviewed with me on this date.*

Employee Signature: 	Date: <p style="text-align: center;">10-25-16</p>
Supervisor Signature: 	Date: <p style="text-align: center;">10-25-16</p>

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