

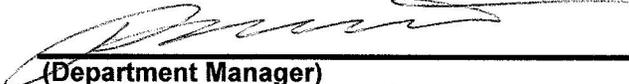
# PAYROLL CHANGE REPORT

Today's Date: <u>12/28/2016</u>	Effective Date: <u>1/9/2017</u>
Hire Date: <u>1/9/2015</u>	Hours Worked: <u>2 Year</u>
Employee's Name: <u>Ted Roemhildt</u>	
Department: <u>IQF</u>	

CHANGE (S)		FROM	TO
X	Rate	\$11.00	\$11.50
	Shift Differential		-
	<b>Total</b>	<b>\$11.00</b>	<b>\$11.50</b>

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

Authorized by: <u></u> (Department Manager)	Date: <u>1/4/17</u>
Guideline verified: <u></u> (Human Resources)	Date: <u>12-27-16</u>
<u></u> (GM Authorization)	Date: <u>1/4/17</u>

TP 1-4-17  
NLS

3 absences  
1-9-17



### 3month/6month Evaluation

Employee Name: <u>Ted Roemhildt</u>	Department: <u>IEP</u>
Job Title:	Hire Date: <u>1-9-15</u>
Supervisor: <u>Matt Heaton</u>	Evaluation Period: <u>2 year</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:

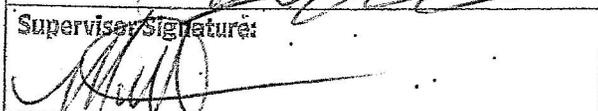
Employee	Supervisor:
Are additional resources/tools needed? <hr/>	Have additional resources/tools that the employee requested been provided?
Are there any barriers or obstacles to successfully perform the work? <hr/>	If obstacles or barriers exist, what has been done to eliminate them?

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

<b>Supervisor Comments</b> <i>(If Not-Acceptable is marked for any Task, specific examples must be provided)</i> <i>Appreciate all the hard work. Good Job!</i>
<b>Employee Comments</b>

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

<b>Employee Signature:</b> 	<b>Date:</b> 1-4-17
<b>Supervisor Signature:</b> 	<b>Date:</b> 1-4-17

*11:00 to 11:50*