

Radford University Probationary Progress Review

Probationary Period End Date:

Review Interval:

6-month Probationary Period End Other:

Employee Name (Last, First, Middle)		Employee RU ID Number
Position Number	Role Title	Working Title
Agency Radford University		Department
Employment Date	Supervisor's Name	Supervisor's Title

Comments on Overall Progress (Attachments may be added if necessary. Indicate # of attachments here: _____)

Overall Results of Review

- Contributor Performance shows consistent achievement toward meeting established performance expectations.
- Below Contributor Performance shows deficiencies which interfere with the attainment of performance expectations.
- Probationary Period Extended In accordance with the Policy 1.45, the probationary period is extended for performance reasons until _____.

Employee Development Plan (Attachments may be added if necessary. Indicate # of attachments here: _____)

Personal Learning Goals	Learning Steps/Resource Needs

Supervisor's Signature:	Date:
Employee's Signature:	Date: