

NEW HIRE 90-DAY JOB EVALUATION

FOR EMPLOYEE

Please complete this evaluation 90 days after your start date. This form is intended to serve as a check in conversation between you and your supervisor. St. Olaf encourages open communication within the department/division; however, if you are not comfortable sharing your responses with your supervisor, please submit them to your supervisor's manager and via email to Human Resources at employment@stolaf.edu.

Employee Name: ______ Date: _____

Supervisor Name:	Dept.:
1. What were your expectations for the jo	b and to what extent have they been met?
•	are you keeping up, struggling to keep up, or not ou like to see in your work within the next 90 days?
3. How would you describe your work env coworkers?	vironment? How well do you get along with your

4.	Is your supervisor's leadership style effective for you? Why or why not?
5.	What do you find most challenging about your job? What is not challenging enough about it?
6.	Do you have the tools, resources, and training you need to effectively do your job? If not, what is missing?
7.	Do you have additional comments or is there anything else you would like to share about your experience thus far?