



NEW HIRE 90-DAY JOB EVALUATION FOR SUPERVISOR

Please complete this evaluation 90 days after initial hire and return to Human Resources.

Employee Name: _____ Hire Date: _____

Supervisor: _____ Date: _____

How satisfied are you with your new employee's performance?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Excellent | Great | Average | Adequate | Poor |
| (5) | (4) | (3) | (2) | (1) |

Would you rehire this employee?

- | | |
|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> |
| Yes | No |

Comments: