|  |  |  |  |
| --- | --- | --- | --- |
| Employee name |  | Position title |  |
| School/Directorate |  | Campus |  |
| Date of commencement | Enter date from | Length of probation | Select probation length |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Task/Project/Goal** | **Training/Development Needs** | **Performance indicators** | **Dates/Period** (from – to) | **Review comments** | **Progress** |
| *Complete the online induction training for all new employees.* | *On-the-job training using ELMO online training software* | *Online training completed within first 2 weeks of commencement* | *F: 1/01/2020*  *T: 14/01/2020* | *Successfully completed and demonstrated an understanding of the learning outcomes* | *Achieved*  *Not achieved*  *In progress* |
|  |  |  | F: Enter date from  T: Enter date to |  | Achieved  Not achieved  In progress |
|  |  |  | F: Enter date from  T: Enter date to |  | Achieved  Not achieved  In progress |
|  |  |  | F: Enter date from  T: Enter date to |  | Achieved  Not achieved  In progress |
|  |  |  | F: Enter date from  T: Enter date to |  | Achieved  Not achieved  In progress |
|  |  |  | F: Enter date from  T: Enter date to |  | Achieved  Not achieved  In progress |

**NOTE:** The information on this form is collected for the primary purpose of managing your probation process. If you choose not to complete all the questions on this form, it may not be possible for you to complete your probation.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Agreement of the **PERFORMANCE OBJECTIVES** (outlined above) for the duration of the probation period | | | | | |
| Staff member |  | Manager/ Supervisor |  | Dean/Director/Executive Director/General Manager |  |
| Signature |  | Signature |  | Signature |  |
| Date | Enter date | Date | Enter date | Date | Enter date |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Please sign the below for **FIRST REVIEW** of probation, and provide some comments in the space provided | | | | | |
|  | | | | | |
| Staff member |  | Manager/ Supervisor |  | Dean/Director/Executive Director/General Manager |  |
| Signature |  | Signature |  | Signature |  |
| Date | Enter date | Date | Enter date | Date | Enter date |

|  |  |  |  |  |  |
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| Please discuss with Human Resources if you are seeking to extend probation OR terminate the appointment prior to commencing this process. The extension or termination process must be completed ASAP **and no later than 10 days prior to the initial probation period expiring.**  Please sign below to **EXTEND PROBATION** and provide the reasons for extending (including recommended extension date) in the space provided. Please note the extension can only be up to the initial length of the probation period or at maximum six months. | | | | | |
|  | | | | | |
| Length of extension |  | Date extended from | Enter date | Date extended to | Enter date |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Staff member |  | Manager/ Supervisor |  | Dean/Director/Executive Director/General Manager |  |
| Signature |  | Signature |  | Signature |  |
| Date | Enter date | Date | Enter date | Date | Enter date |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Please complete for the **FINAL REVIEW** only | | | | | | | |
| Please select **one:** | | **Confirm** appointment |  | **Terminate** appointment |  |  | |
|  | | | | | | | |
| Staff member |  | | Manager/ Supervisor |  | Dean/Director/Executive Director/General Manager | |  |
| Signature |  | | Signature |  | Signature | |  |
| Date | Enter date | | Date | Enter date | Date | | Enter date |

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| --- | --- | --- | --- |
| If recommendation to **TERMINATE APPOINTMENT**, please complete below  *\*\*Please note for* ***Academic staff*** *- signatures are required from both the Deputy Vice-Chancellor (Academic) and Director, Human Resources*  *for* ***VET teachers*** *and* ***General staff*** *- only the Director, Human Resources’ signature is required\*\** | | | |
| Deputy Vice-Chancellor (Academic) |  | Director, Human Resources |  |
| Signature |  | Signature |  |
| Date | Enter date | Date | Enter date |

**Note:** recommendations must reach Human Resources within the time periods specified below:

* **VET TEACHERS and GENERAL STAFF** for confirming, extending or terminating appointments, this form must be submitted no later than 10 days prior to the end of the probation period; and
* **ACADEMIC STAFF** no later than four months prior to the end of the probation period.