

Choose one: Probationary Review Interim Review (Use only for midpoint review with salaried employees)

Employee Name: _____ Supervisor Name: _____

PERNR: _____ Classification/Job Title: _____

Department/Unit: _____ Due Date: _____

Summary of employee's performance (Related to job duties, behavior and general performance):

Attach additional supporting documentation if applicable.

Complete Probationary OR Interim Determination:

Probationary Determination

- The performance and/or conduct of the employee met expectations during the probationary period. The employee successfully completed probation.
- The performance and/or conduct of the employee did NOT meet expectations during the probationary period. (Supervisors: contact MSU Employee Relations at 517-353-5510 prior to meeting with employee)

Interim Determination

- The performance and/or conduct of the employee met expectations during the interim evaluation period. The evaluation period will continue.
- The performance and/or conduct of the employee did NOT meet expectations during the interim period. (Supervisors: contact MSU Employee Relations at 517-353-5510 prior to meeting with employee)

Below signatures indicate that the above information was discussed.

Employee Signature: _____ Date of discussion _____

Supervisor Signature: _____ Date of discussion _____

When the probationary or interim review is completed, provide a copy of signed document to the employee and retain a copy of the document in the department. Supervisor or unit designee: Scan and email signed form from an MSU email address to: performance@hr.msu.edu. MSU is an affirmative-action, equal-opportunity employer.

