

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** _____

