

## APPENDIX F: INFORMAL EVALUATION: MEMBERS OF CUPE 2626

*For every appointment there shall be an informal evaluation based on criteria relevant to the Unit in which the appointment is held and relevant to the nature of the duties required by the appointment (16.3). The informal evaluation cannot take place earlier than the mid-point of the appointment and shall be conducted by the Employee's immediate Supervisor (16.5.1, 31.4).*

<b>1.</b>	<b>Employee's Surname:</b>	<b>Given Name:</b>	<b>Empl. No.:</b>
<b>2.</b>	Nature of the appointment and work being evaluated ( <i>e.g. teaching assistant for ABC 1000; corrector for DEF 2000; research assistant for project on gerontology</i> ):		
<b>3.</b>	<b>Date work began:</b>	<b>Date of the Evaluation:</b>	
<b>4.</b>	Please check the appropriate box. You may add comments if you choose a) or b); you <b>must</b> add specific information in the <i>Comments</i> section if you choose c) or d).		
	<b>a)</b> The performance is excellent, that is, all the requirements are being met and the quality of the performance exceeds expectations.	<input type="checkbox"/>	
	<b>b)</b> The performance is satisfactory, that is, all the requirements are being met and the quality of the performance meets expectations.	<input type="checkbox"/>	
	<b>c)</b> The performance is satisfactory, but one or more minor deficiencies exist and should be corrected ( <i>complete the Comments section below</i> ).	<input type="checkbox"/>	
	<b>d)</b> The performance is seriously deficient, and discipline is recommended ( <i>complete the Comments section below</i> ).	<input type="checkbox"/>	
<b>5.</b>	<b>Comments</b>		
	<i>(Additional comments, if any, should be appended on a separate sheet).</i>		
	<i>Pursuant to 16.5.3 of the CUPE collective agreement, I have "given a copy of this informal evaluation" to the employee, and I have given the employee "an opportunity to discuss the results" with me before having the evaluation placed in the employee's file.</i>		
	<b>Name of the immediate supervisor (please print):</b>		
	<b>Signature of the immediate supervisor:</b>		<b>Date:</b>

**Please return a copy of this evaluation to the Employee and the appropriate authority so that it may be included in the employee's personal file.**