



Harry Gwala District Municipality

PROBATION FORM

SECTION A – TO BE COMPLETED THE SUPERVISOR/MANAGER

Name of Employee		Employee No.										
Department				Probation Period:								
Position				Start Date	D	d	m	m	y	y	y	Y
Grade				End Date	D	d	m	m	y	y	y	Y
Key Job Accountabilities												
No.	Key Accountabilities	Weight in %	Management Expectations during the Probationary Period									
1												
2												
3												
4												
5												



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SECTION B – TO BE COMPLETED BY THE EMPLOYEE

Key Job Accountabilities			
No.	Key Accountabilities	Weight in %	Job and Personal Needs of the Incumbent
1			
2			
3			
4			
5			



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SECTION C – STATEMENTS OF AGREEMENT

Area of agreement	Details	Employee's Commitment	Management Commitment
Frequency of one on one meetings			
Measurement of performance			
Quarterly review of performance			
Employee's development needs			
Employee's environment needs			
Employee's orientation needs			

SECTION D - EMPLOYEE ENDORSEMENT

Name of Employee		Employee No.								
Comments										
Signature		Date:	d	d	m	m	y	y	y	Y



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MANAGEMENT ENDORSEMENT

Name of Employee		Employee No.								
Comments										
Signature		Date:	d	d	m	m	y	y	y	Y



SECTION D - 1ST QUARTER REVIEW SECTION

Key Job Accountabilities No.	Employee's Review		Manager's Review	
	Job and Personal Expectations	Quarterly Assessment	Employee's Expectation	Quarterly Assessment
1.				
2.				
3.				
4.				
5.				

Employee's overall comments: _____

Name: _____ Signature: _____ Date: _____

Manager's final outcome comment:

<p>Name: _____ Signature: _____ Date: _____</p>



SECTION E – 2ND AND FINAL QUARTER REVIEW SECTION

Key Job Accountabilities No.	Employee's Review		Manager's Review	
	Job and Personal Expectations	Quarterly Assessment	Employee's Expectation	Quarterly Assessment
1.				
2.				
3.				
4.				
5.				

Employee's overall comments: _____

Name: _____ Signature: _____ Date: _____

Manager's final outcome comment:

Name: _____ Signature: _____ Date: _____
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