# Mid and Final Probation Review Form

# (For all staff ****except**** Non-Clinical Lecturers and Clinical Senior Lecturers)

The probationer’s manager/supervisor should complete this form and ensure that Section E is signed before submitting it to the HR Staff Hub via the [HR Portal](https://staff-hub.imperial.ac.uk/support/catalog/items/2).

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| Probationer’s College Identifier (CID) | |  | | Title: |  |
| Surname: |  | | | First name(s): |  |
| Faculty/Service: |  | | | Date of Meeting: |  |
| Name of Mentor (Research Staff only): | | |  | | |

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| **Section A**  Has the member of staff demonstrated the necessary skills and knowledge for the post? Yes  No | |
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| Is the quality of the work produced of an acceptable standard? | Yes  No |
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| Is the member of staff able to use their own initiative? | Yes  No |
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| Is the quantity of the work produced of an acceptable level? | Yes  No |
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| Do they co-operate and communicate well with others? | Yes  No |
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| Is time-keeping satisfactory? | Yes  No |
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| Is attendance satisfactory?  Has the member of staff completed their time sheets, where required?\*  Has the member of staff successfully completed specific job training requirement(s) as part of the probation period?    At their midway review, is the member of staff fully aware of Imperial Essentials’ mandatory requirements and are they progressing and expected to complete these by their final review?\*  At their final review, has the member of staff fulfilled all of Imperial Essentials’ mandatory requirements?\*  Has the member of staff completed the Equality and Diversity e-Learning course\*  *\*Complete as applicable*  *If any of the above answers is ‘no’ please provide further details in Section B.* | Yes  No  Yes  No  Yes  No  Yes  No  Yes  No  Yes  No |
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| Are there any factors which have prevented the full duties of the post being performed? | Yes  No |
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| Has the member of staff identified problems or areas in which they require further support? | Yes  No |
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| *If any of the above answers is ‘yes’ please provide further details in Section B.* | |
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| Have Disclosure and Barring Scheme (DBS) and/or Office for Nuclear Regulation (ONR) checks been completed, if applicable? | Yes  No |
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| [For Security Officers within Security Division only] Has the 10 year vetting process, as required under British Standard 7875 been completed successfully? | Yes  No |

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| **Section B** |
| Please comment on overall work performance during the probation period under review. |
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| Please comment on the ability to understand and embed the College’s [values and behaviour](https://www.imperial.ac.uk/about/values/our-values/);  Respect (we treat each other fairly and appropriately, with kindness and respect, valuing each person’s individual experience, perspectives and contribution).    Collaboration (we work together, cultivating an inclusive and impactful College community).    Excellence (we strive for quality in everything we do, taking pride in our work, delivering impact through our commitment).    Integrity (we act in a principled way, being honest and open, checking, challenging and changing our practices and behaviours).    Innovation (we become inspired by possibilities, venturing into the unknown with open minds and having the courage to embrace change). |
| Please comment on work performance and any training and development to be undertaken in the next six months. |
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| Please comment on any problems identified and what steps have been agreed to address problems e.g. formal training, informal guidance on tasks, review of duties, targets set and agreed timescale for review. |
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| **Section C**  **FOR MID REVIEW ONLY**  **I confirm that the mid probation review has taken place.** | | | | | | |
| Manager’s/Supervisor’s signature: |  | | | | | |
| Print name: |  | | Date: |  | |  |
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| **FOR FINAL REVIEW ONLY**  **Extension to Probation Period/Recommendation for Probation Review:** | | | | | | |
| Date probation ends:  Do you wish to extend the probation period/recommend probation review? Yes  No  If no, please go to Section D  If yes, HR must be informed of the intention to extend/review the probation period before it is actioned, please give reasons for extension/review and confirm if this has been discussed with HR? | | | | |  | |
| Proposed extension until: |  | | | |  | |
| Next suggested review date: |  | | | |  | |
| Manager’s/Supervisor’s Signature: |  | | | |  | |
| Print Name: |  | Date: | |  |  | |
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| **Section D**  **FOR FINAL REVIEW ONLY**  **Confirmation of Appointment** | | | | |
| **I confirm that it is my recommendation that this appointment be confirmed.** | | | | |
| Manager’s/Supervisor’s signature: |  | | | |
| Print name: |  | Date: |  |  |
| *Following a successful probation, a PRDP should be planned in line with local timescales.* | | | | |

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| **Section E**  **Employee Declaration – To be completed in ALL cases:** | | | | |
| I confirm that my probationary period has been discussed with me. | | | | |
| Probationer’s signature: |  | | |  |
| Print name: |  | Date: |  |  |
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| **Authorised Departmental/School/Institute Signatory** **- To be completed in ALL cases:** | | | | |
| Authoriser’s signature  Print name: |  | Date: |  |  |
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