Rivers East Workforce Development Board

Operator Name

On-the-Job Training (OJT) Contract: Trainee Evaluation

Trainee Name: Supervisor Name:

Company Name:

 Section 1: Evaluation

|  |  |  |  |
| --- | --- | --- | --- |
| JOB SKILLS OBJECTIVES | 30-DAY EVALUATION OF SKILLS | MIDPOINT EVALUATION OF SKILLS | FINAL EVALUATION OF SKILLS |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |
|  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  | Mastered objective [ ] Satisfactory progress [ ] Unsatisfactory progress [ ]  |

Section 2: Authorized Signatures

*30-day Evaluation Mid-Point Evaluation*

|  |  |  |
| --- | --- | --- |
| I hereby certify that the above information is accurate. |  | *I hereby certify that the above information is accurate.* |
| SUPERVISOR SIGNATURE: | DATE: |  | SUPERVISOR SIGNATURE: | DATE: |
| WIOA CAREER ADVISOR SIGNATURE: | DATE: |  | WIOA CAREER ADVISOR SIGNATURE: | DATE: |
| TRAINEE SIGNATURE: | DATE: |  | TRAINEE SIGNATURE: | DATE: |

*Final Evaluation*

|  |
| --- |
| I hereby certify that the above information is accurate. |
| SUPERVISOR SIGNATURE: | DATE: |
| WIOA CAREER ADVISOR SIGNATURE: | DATE: |
| TRAINEE SIGNATURE: | DATE: |

Please answer the question below after completing the FINAL evaluation:

🞏 Having satisfied the requirements of the training plan, employment continues on an unsubsidized basis.

Section 3: Comments (please explain any unsatisfactory evaluation items)