



Trinity College Dublin

Coláiste na Tríonóide, Baile Átha Cliath

The University of Dublin

Probation Review Form

For All Staff

Type of Review *Additional Review is optional and available if required	Goals/Objectives Setting ☐	First Review ☐	Additional Review* ☐	Final Review ☐
Employee name				
Employee number				
Department				
Job Title & Grade				
Employee Status	Permanent Contract ☐	Fixed Term Contract ☐	Specific Purpose Contract ☐	
Start date of this employment (DD/MM/YYYY)	Enter a date			
Probation Expiry Date (DD/MM/YYYY)	Enter a date			
First Probation Review meeting date (DD/MM/YYYY)	Enter a date			
Final Probation Review meeting date (DD/MM/YYYY)	Enter a date			
Line Manager(s) / Head(s) of School/Department Name				

If you need more space for goals/objectives , please use Appendix A.

B. Probation Review

Line Manager

On this section the Line Manager selects their overall rating for the employee's performance against the assessment area(s) of Capability for the role, Behaviour, Health and Safety, Attendance and Training concluding with the overall rating for this Probation Review

The Line Manager should update the comment boxes with additional comments about the employee's performance during the assessment period under review.

The Line Manager should issue the completed probation review form to the employee normally five days in advance of the probation review meeting for their comments.

Reasonable accommodations

The Line Manager should ensure that where a staff member has an agreed reasonable accommodation(s) or workplace adjustment(s) in place, they are appropriately considered throughout the probation process.

Where appropriate, the Line Manager should encourage an employee who may require reasonable accommodation(s) or workplace adjustment(s) to engage with the appropriate University support services, including the Disability Service <https://www.tcd.ie/disability/staff-with-a-disability/> (through contact with the Staff Disability Liaison Officer), so that appropriate supports can be identified and implemented where necessary.

For more information on probation procedures, please see the [Probation Policy](#).

Employee

In this section the employee should review, comment and sign the review form(s) as requested.

For more information on probation procedures, please see the [Probation Policy](#).

Ratings Description	1	Met expectations	Good performance, all goals/objectives were delivered, and expectations were met to the required standard. Overall employee is effective in the role.
	2	Does not meet expectations	Performing in some area(s) only, needs significant improvement to achieve the required standard. There are areas for development apparent in the performance of the candidate which can/cannot be overcome at this time

B. Probation Review (continued)

Overall Assessment		Met Expectations	Does not meet Expectations
Please tick as appropriate in relation to the requirements of the role			
Capability for the Role	Work performed accurately and effectively?	☐	☐
	Work is of good quality, well executed, and meets deadlines?	☐	☐
	Works well with colleagues and is part of the team?	☐	☐
	Demonstrates the required ability to perform all the duties of the role?	☐	☐
	Line Manager(s) comments Employee comments		

		Met Expectations	Does not meet Expectations
Behaviour	Has the employee's behaviour been consistent with the University's Behavioural Values in all regards?	☐	☐
	<div>Line Manager(s) comments</div> <div>Employee comments</div>		
Health & Safety	Understands the importance of Health & Safety in the workplace and follows guidelines?	Please tick	Yes ☐ No ☐
	Pays due care and attention to both own and others safety?	Please tick	Yes ☐ No ☐
Attendance	Has the employee had good attendance, timekeeping and punctuality?	Please tick	Yes ☐ No ☐
	Has the employee complied with Annual Leave Regulations?	Please tick	Yes ☐ No ☐
	<div>Line Manager(s) comments</div> <div>Employee comments</div>		

Sick Leave	Has the employee complied with the Sick Leave Absence Management requirements?	Please tick	Yes ☐	No ☐
	Number of sick days?	Certified ☐	Uncertified ☐	
	<div>Line Manager(s) comments</div> <div>Employee comments</div>			
Disability and Reasonable accommodations (disclosure is at the discretion of the employee taking part in the probation process)	Has the employee indicated whether reasonable accommodation(s) are in place? If Yes, is the employee:	Please tick	Yes ☐	No ☐
	- Meeting expectations with reasonable accommodation(s) and or workplace adjustment(s) in place	Please tick	Yes ☐	No ☐
	- Not meeting expectations with reasonable accommodation(s) and or workplace adjustment(s) in place	Please tick	Yes ☐	No ☐
	<div>Line Manager(s) comments</div> <div>Employee comments</div>			

Training Needs/Training Undertaken	Please outline any courses the employee has attended to date		Mandatory	Recommended
			☐	☐
	Please detail any future courses that the employee should complete		Mandatory	Recommended
			☐	☐
Assessment	Have you discussed this assessment with the employee?	Please tick	Yes ☐	No ☐
	I can confirm that the employee's performance:		Met Expectations ☐	Does not meet Expectations ☐
Comments:	Line Manager(s) comments	Employee comments		

C. Probation Outcome

In this section the Line Manager selects their recommendation for the relevant review type before all parties confirm completion of the review by signing-off at the end of the form.

First Probation review Outcome	For the first probation review please confirm your decision:	I confirm that the employee has passed their first probation review and continues in their probation.	☐			
		I confirm that there are area(s) apparent in the performance of the employee that require further development support, and an additional probation review should take place on: <i>Please contact your HR Partner for further advice at this stage.</i>	☐ Enter a date DATE MONTH YEAR			
		I confirm that the employee has failed probation despite the line manager having provided additional supports and feedback provided as recorded on the probation review form, and their employment in the current appointment will be terminated. <i>Please contact your HR Partner for further advice at this stage.</i>	☐			
Additional Reviews(s) Outcome, only if necessary	For the additional review please confirm your decision:	I confirm that the employee has passed their additional probation review and continues in their probation	☐			
		I confirm that the employee has failed probation despite the line manager having provided additional supports and feedback provided as recorded on the probation review form, and their employment in the current appointment will be terminated. <i>Please contact your HR Partner for further advice at this stage.</i>	☐			
Final Review Outcome Only	For the final review please confirm your decision:	I confirm that the employee has passed probation and should continue in their current appointment.	☐			
		I confirm that the employee has failed probation despite the line manager having provided additional supports and feedback provided as recorded on the probation review form, and their employment in the current appointment will be terminated. <i>Please contact your HR Partner for further advice at this stage.</i>	☐			
Sign-off	Signed: Employee		Signed: Manager / Head of Department		Signed: Second Manager (if applicable)	
	<div>Enter a date DATE MONTH YEAR</div>		<div>Enter a date DATE MONTH YEAR</div>		<div>Enter a date DATE MONTH YEAR</div>	

It is the responsibility of the manager to return the completed probation forms to Human Resources at probations@tcd.ie and to provide a copy to the employee.
Probation Form last updated 08.07.2026

This section should be drafted in line with the job description for the role.

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