** Probation Outcome Form**

Action for Line Manager/Supervisor: Please complete and return this form to Payroll no later than four (4) weeks **prior** to the end of the probationary period. This is to be completed once a final decision has been made.

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| --- | --- | --- | --- |
| **Employee Information** | | | |
| Employee Name |  | Employee Number |  |
| Position title |  | Position Number |  |
| Probation End Date |  | Appointment End date |  |
| Classification |  | Employee Status |  |
| Increment level |  | Line Manager |  |
| School/Centre |  | | |
| **Recommendation –** Please tick one of the following: | | | |
| **CONFIRM APPOINTMENT**  I confirm that formal discussions have been held with the staff member identified above on the requirements for confirmation of appointment (as stated in the Probation Outcome Letter, and in accordance with the Edith Cowan University Enterprise Agreement) and future goals and expectations have been clearly established and documented. | | | |
| **TERMINATE EMPLOYMENT**  In considering Termination of Employment, please contact your Business Partner.  Note: Extension of Probation requires endorsement from the Director, People and Culture and the Line Executive.  Attach all supporting documentation to this form prior to processing and record keeping. | | | |
| **Employee Signature:** | | Name:  Date: | |
| **Line Manager/Supervisor Comments** | | | |
|  | | | |
|  | | | |
|  | | | |
| **Line Manager/Supervisor Signature:** | | Name:  Date: | |
| **Approval** | | | |
| **Line Executive Signature:** | | Name:  Date: | |

\*Upon completion, please forward a copy to **Payroll Services** for processing and record keeping.