

SEQUATCHIE VALLEY HEAD START

For Your Information: Performance Note for Documentation File

| Employee Name: _____ | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="left" colspan="2"><i>Purpose of Performance Note:</i></th> </tr> <tr> <td><input type="checkbox"/></td> <td>Progress Review</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Commendation</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Incident</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Critical Incident</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other: _____</td> </tr> </table> | <i>Purpose of Performance Note:</i> | | <input type="checkbox"/> | Progress Review | <input type="checkbox"/> | Commendation | <input type="checkbox"/> | Incident | <input type="checkbox"/> | Critical Incident | <input type="checkbox"/> | Other: _____ |
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| <input type="checkbox"/> | Progress Review | | | | | | | | | | | | |
| <input type="checkbox"/> | Commendation | | | | | | | | | | | | |
| <input type="checkbox"/> | Incident | | | | | | | | | | | | |
| <input type="checkbox"/> | Critical Incident | | | | | | | | | | | | |
| <input type="checkbox"/> | Other: _____ | | | | | | | | | | | | |
| Position / Workstation: _____ | | | | | | | | | | | | | |
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COMMENTS: _____

Person Writing Report: _____ **Date:** _____

(Signature)

Employee: _____ **Date:** _____

(Signature required only in matters of critical incident)

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