EVALUATION PANEL SUMMARY

Name	Date of Panel	Period Covering

SECTION I. SIGNIFICANT ACCOMPLISHMENTS/ GOALS ACHIEVED BY TRAINEE/INTERN

SECTION II. COMMENTS (Please check appropriate box)

By examination of the trainee/intern and review of the documentary evidence, we find that he/she

☐ is making satisfactory progress. (Please summarize comments)

☐ is not making satisfactory progress. In order to assist the trainee achieve an acceptable level of progress, we recommend:

- ☐ an extension of training period for _____ days.
- ☐ development of Performance Improvement Plan in accordance with GSA Performance Management Handbook, OAD P 9430.1. *(Summarize comments under Areas of Concern)*
- ☐ Other *(Summarize comments under Areas of Concern)*

SECTION III PANEL RECOMMENDATIONS/AREAS OF CONCERNS *(if any)*:

PANEL MEMBERS SIGNATURE	TITLE	DATE
1.		
2.		
3.		
4.		