
EVALUATION PANEL SUMMARY

Name	Date of Panel	Period Covering
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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.