



30-Day New Employee Review

Employee Name:
Job Title:
Department:
Manager Name:
Review Date:

1. Role Overview & Initial Impressions

Brief Summary of Role (by Manager):

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Employee's Reflection on First 30 Days:

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What has gone well? What challenges have you faced?

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2. Training & Support

Completed Training Areas:

- Company Induction
- Health & Safety – HSE Screen & Desk to be completed with review
- Systems Training
- Departmental Procedures
- Other: _____

Additional Training Required / Requested:

Supportive Feedback (Manager):

What’s working well, and how we can further support you?



3. Role Objectives

Key Role Objectives for Next 30–90 Days:

- 1.
- 2.
- 3.
- 4.

How Success Will Be Measured:

4. Belonging, Culture & Communication

Employee Experience So Far (Culture & Team Fit):

Any Barriers or Concerns to Address:



Manager's Observations & Feedback:

5. Next Steps & Follow-Up

Follow-Up Date (90-Day Check-In): _____

Agreed Actions Between Now and Then:

- 1.
- 2.
- 3.
- 4.
- 5.

Manager Signature: _____

Employee Signature: _____