Waiver of Trial Period Checklist

_____	_____	_____
Employee	EOD	Facility

Dates of any leave without pay: _____

Date employee rated: _____

I. Complete this section for correctional security officers I (ensure all items are checked):

____ Successful completion of a trial period totaling six months plus any adjustments

____ Completion of all training requirements

____ Officer received a rating of at least "meets standards" 30 days prior to the effective date of the promotion to Correctional Security Officer II

II. Complete this section for all employees <u>except</u> correctional security officers I (ensure all items are checked):

____ Successful completion of a trial period of at least six months plus any adjustments

____ Employee has been approved by both the sending and receiving facilities for transfer or has been selected for promotion

____ Employee received a rating of at least "meets standards" 30 days prior to the effective date of the transfer or promotion

_____	_____
Appointing Authority Signature	Date