

## Induction Evaluation

To assist with continuous improvement of the Induction Process at Flinders, please complete and submit this form after your first three months at the University.

<b>Employee Name</b>		<b>Ext. No.</b>	
<b>Faculty/Division</b>		<b>Email address</b>	
<b>School</b>		<b>Start Date</b>	

Please circle the appropriate number with your response, 1 indicating that you **strongly agree**, and 5 indicating that you **strongly disagree**.

<b>PRE-EMPLOYMENT</b>					
The appointment process was straightforward.	1	2	3	4	5
I received information from the University in a timely manner.	1	2	3	4	5
I received useful information before my arrival to help me familiarise with the University.	1	2	3	4	5
<b>FIRST DAY</b>					
My supervisor completed the OH&S Checklist with me and discussed other local worksite health and safety information relevant to me.	1	2	3	4	5
I was given the correct details of where my new workplace was and who to report to.	1	2	3	4	5
Colleagues were aware of my arrival.	1	2	3	4	5
Colleagues helped me feel welcomed.	1	2	3	4	5
My initial worksite induction was conducted in an efficient and effective manner.	1	2	3	4	5
<b>FIRST WEEK</b>					
My new position was effectively explained to me by my supervisor and I was able to start work without delay.	1	2	3	4	5
My supervisor, or a delegated colleague, was available to provide me with assistance and support when I required it.	1	2	3	4	5
My phone and computer were accessible during my first week of employment.	1	2	3	4	5
<b>FIRST THREE MONTHS</b>					
I understand my Probation requirements.	1	2	3	4	5
I understand my Performance Review requirements.	1	2	3	4	5
I feel well-informed and comfortable in my role.	1	2	3	4	5
<b>SUGGESTIONS AND COMMENTS</b>	Please include any suggestions and comments you have about the induction process				
<i>Thank you</i>					

Please return to the Professional Development Unit, Flinders University.