

**CITY OF DULUTH**  
**Performance Report / Termination Form**  
**for Seasonal Employees**  
*(max. 185 days or 1,040 hours)*

Employee Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Position Type:  Seasonal

Date Hired: \_\_\_\_\_ Date Terminated: \_\_\_\_\_ Total Days Worked: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Department/Division: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

**For each area listed below, check the appropriate rating:**

	<b>Excellent</b>	<b>Satisfactory</b>	<b>Unsatisfactory</b>
Quality and quantity of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to get along and work cooperatively with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to follow instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Degree of supervision needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance/punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please provide the following additional information:**

Strengths: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Weaknesses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you rehire?  Yes  No

Other comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_