

**DEPARTMENT OF JUVENILE JUSTICE
JUVENILE PROBATION BASIC TRAINING PROBATIONARY PROGRAM**

PHASE I – DAILY OBSERVATION REPORT

Check Applicable Week: 1 2 3 4

TRAINEE _____ DATES: _____ TO _____
(Print Name)

SUPERVISOR/DESIGNEE _____
(Print Name)

INSTRUCTIONS: This report is completed by the supervisor and given to the trainee to notify him or her of deficiencies and recommended strategies to correct those deficiencies. The officer must demonstrate acceptable performance (receive a score of 4 or higher) for a total of 20 workdays. **NOTE:** These 20 workdays do not have to be consecutive. There shall be a minimum of four DORs to complete this process. A copy of the report should be given to the trainee at the end of the fifth day after all signatures have been obtained. The original report is placed in Section 1 of the trainee’s training file.

The process of evaluating the trainee’s performance and applying the evaluation to the numeric rating scale consists of four steps: (1) Observe Behavior, (2) Identify Appropriate Rating Category, (3) Compare Observed Behavior to the Standardized Evaluation Guidelines, and (4) Assign Performance Rating. When assigning the performance rating to the trainee’s performance, knowledge, and ability, use the numerical scale of “1” through “7.” ***The minimum acceptable performance rating is “4.”*** If any evaluator other than the supervisor rates a task, the evaluator must initial next to the task rated.

“N/O” means the trainee did not perform a task in a particular category and therefore could not be evaluated. No numerical performance rating is given with this designator. Only behavior actually performed and observed during the time of this report may be evaluated.

RATING CATEGORY (<i>Scale: 1 2 3 <u>4</u> 5 6 7</i>)	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
(1) Personal Appearance Guidelines	[]	[]	[]	[]	[]
(2) Acceptance of Feedback	[]	[]	[]	[]	[]
(3) Attitude Toward Work.....	[]	[]	[]	[]	[]
(4) Knowledge of Program Services Manual & Facility/Program Operating Procedures.....	[]	[]	[]	[]	[]
(5) Report Writing – Organization / Details / Appropriate Time Used.....	[]	[]	[]	[]	[]
(6) Report Writing – Grammar / Spelling / Neatness	[]	[]	[]	[]	[]
(7) Field Performance – Non-Stress Conditions	[]	[]	[]	[]	[]
(8) Field Performance – Stress Conditions	[]	[]	[]	[]	[]
(9) General Supervision of Youth	[]	[]	[]	[]	[]
(10) Officer Safety	[]	[]	[]	[]	[]
(11) Situation Management - Voice.....	[]	[]	[]	[]	[]
(12) Problem Solving / Decision Making	[]	[]	[]	[]	[]

RATING CATEGORY (Scale: 1 2 3 <u>4</u> 5 6 7)	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
(13) Interaction with Youth.....	[]	[]	[]	[]	[]
(14) Relationship with General Public / Fellow Officers	[]	[]	[]	[]	[]
Trainee Initials	_____	_____	_____	_____	_____
Supervisor Initials	_____	_____	_____	_____	_____

For an example comment, see "Standardized Evaluation Guidelines" / "Special Designators" in the Guide.

COMMENTS	Day 1	_____
	Day 2	_____
	Day 3	_____
	Day 4	_____
	Day 5	_____

Is this training progressing on schedule? (check one) YES NO If you answered "NO," please document why in the Comments section.

At the end of the week, document your review of this report by signing below.
 (Place original in Section 1 of the trainee's training file.)

TRAINEE _____ DATE _____
 Comments: _____

DESIGNEE _____ DATE _____
 Comments: _____

SUPERVISOR _____ DATE _____
 Comments: _____