RG 90-day Evaluation

We thank you for your service at RG. Please fill out this survey so that we can better serve you.

\* Required

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**Name**\*



**Team**\*



**How satisfied are you with your current job responsibilities? Are there any areas that you would like to change? Please provide details.**\*



**How is your working relationship with your Team Lead? If you feel the working relationship can be improved, please give us your thoughts/suggestions.**\*



**How is your working relationship with your fellow Team Members? If you feel the working relationship can be improved, please give us your thoughts/suggestions.**\*



**How many hours do you average per week working on RG projects?**\*

* +  5 hours or less
  +  10 hours or less
  +  20 hours or less
  +  More than 20 hours

**Please tell us what you have accomplished in the last 90 days at RG (trainings, projects, etc.). Please provide details.**\*



**How do you think the last 90 days have been for you at RG overall?**\*



**How would you rate your overall satisfaction with RG at this time?**\*

* +  Very Satisfied
  +  Satisfied
  +  Neutral
  +  Dissatisfied
  +  Very Dissatisfied

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