# INSTALLATION MANAGEMENT ACTIVITY-DUI-COLORarmylogovector_black.gif180 Day - Orientation & Integration Survey New Team Member

**All responses on this survey are used to deliver the best onboarding program for new team members. Your participation is anonymous, names are required for tracking purposes only. Turn this survey in to the Workforce Development Division within 10 business days after your 180th day.**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unsatisfied Satisfied Very Satisfied**

 **1 2 3 4 5**

**Please answer/rate the following statements:**

1. Your overall Onboarding experience for the first 180 days. **1 2 3 4 5**

2. Sponsor (maybe same as supervisor) onboarding assistance **1 2 3 4 5**

3. Your transition and integration into your organization **1 2 3 4 5**

4. Supervisor engagement, dialog, and performance feedback **1 2 3 4 5**

5. Operation Excellence (OPEX) training **1 2 3 4 5**

6. Understand the organizational mission/goals and expectations **1 2 3 4 5**

7. Provided the necessary training to preform my duties **1 2 3 4 5**

8. Allotted time to complete mandatory and other required training **1 2 3 4 5**

9. Encouraged to seek professional development opportunities? **1 2 3 4 5**

10. Conducted quarterly performance discussions w/supervisor? Yes No

11. Conducted your In-progress Performance Review (midpoint)? Yes No

12. Operation Excellence (OPEX) training Yes No

13. Attended the Team Member Orientation (TMO) briefing Yes No

14. Reviewed your Individual Development plan w/supervisor? Yes No

 **Please make any additional comments or suggestions on the back of this survey.**

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