EXPANDED SUBSIDIZED EMPLOYMENT AGREEMENT
EMPLOYEE MIDPOINT AND COMPLETION QUESTIONNAIRE

Employee Name:	Agreement #:
Employer:	Interview Date :

(**Note: Interview to be completed on-site**.)

1. Are you receiving the direction you need to do your job? Yes ☐ No ☐
   If no, explain:
   _____
   _____

2. Do you have any concerns about the duties you are performing? Yes ☐ No ☐
   If yes, explain:
   _____
   _____

3. Do you feel your skills have improved as a result of this work assignment? Yes ☐ No ☐
   If no, explain:
   _____
   _____

5. Is your work being evaluated by a supervisor? Yes ☐ No ☐
   Explain:
   _____
   _____

6. Are you being compensated at the wage as indicated in the agreement? Yes ☐ No ☐
   Explain:
   _____
   _____

_____ _____
Employee Signature Date

_____ _____
Service Provider Signature Date

1 Original Required
Revised February 2019