## **Performance Improvement Plan (PIP)**

| Employee Name:                        |                     |                |                        |  |  |
|---------------------------------------|---------------------|----------------|------------------------|--|--|
|                                       |                     |                |                        |  |  |
| Job <sup>-</sup>                      | Title:              |                |                        |  |  |
|                                       |                     |                |                        |  |  |
| Depa                                  | artment:            |                |                        |  |  |
|                                       |                     |                |                        |  |  |
| Mana                                  | ager/Supervisor:    |                |                        |  |  |
|                                       |                     |                |                        |  |  |
| Date                                  | of Plan Initiation: |                |                        |  |  |
|                                       | <u> </u>            |                |                        |  |  |
|                                       |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
| Dumage of the DID                     |                     |                |                        |  |  |
| Fui                                   | rpose of the PIP    |                |                        |  |  |
|                                       |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
| Areas of Concern / Performance Issues |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |
| Performance Expectations & Goals      |                     |                |                        |  |  |
| #                                     | Expectation / Goal  | How to Achieve | Measurement / Criteria |  |  |
| 1                                     |                     |                |                        |  |  |
| 2                                     |                     |                |                        |  |  |
|                                       |                     |                |                        |  |  |

Resources, Support, and Training

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| PIP Duration & Review Start Date: | Dates                |      |
|-----------------------------------|----------------------|------|
| End Date:                         |                      |      |
| Progress Review Dates:            |                      |      |
|                                   |                      |      |
| Consequences of Not               | Meeting Expectations |      |
|                                   |                      |      |
| Signatures                        |                      |      |
| Name                              | Signature            | Date |
| Employee                          |                      |      |
| Manager/Supervisor                |                      |      |

HR Representative