# Performance Improvement Plan – PIP

| **Employee Name:** |  |
| --- | --- |
| **Position:** |  |
| **Assessment Date:** |  |
| **Conducted by:** |  |
| **Primary Objective:** |  |
| **Next Meeting:** |  |
| **PIP Completed?** | Yes or No |

Fill-in this section by listing in detail the responsibilities, competencies, and performance measures of the employee.

| **Key Responsibilities** * List what appears in the employee’s job description
 |  |
| --- | --- |
| **Specific Competencies Required*** What are the critical competencies expected of the employee?
 |  |
| **Performance Measures** * How is the performance of the employee measured?
* What tools are used to measure employee’s performance?
 |  |

Fill-in this next section by listing in detail the outcome of the employee’s job duties and the areas of improvement for the employee to address.

| **Outcome*** What are the employee’s outputs or activities performed?
* Describe the outcome or output of the employees work/tasks
 |  |
| --- | --- |
| **Areas of Improvement*** What or where can the employee improve?
* What support can be provided to address improvements?
 |  |

Fill-in the expected timelines and the progress to date.

| **Timelines*** What is the timeline for completion?
* Generally, employees and their supervisor should meet every 30 days for a full 90-day performance improvement plan
* When is the next meeting?
 |  |
| --- | --- |
| **Touchpoints*** Address the progress/lack of progress to date
* Where is the employee expected to be by their next check-in?
* What will be the consequences if there isn’t any forward progress?
 |  |

Fill-in the manager’s comments or the employee’s response.

| **Comments:**  |
| --- |
|  |

All participants in this process discussed and agreed on the content of this PIP. This Plan is expected to last \_\_\_\_ months, and progress will be formally reviewed every \_\_\_ months.

**Employee Agreement**

I have participated in the process of creating this PIP and agree to make every effort to complete it: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (initials)

Employee’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_