

# Employee Performance Improvement Plan

**Date:** [Insert Date]

**Employee Name:** [Insert Employee Name]

**Employee ID:** [Insert Employee ID]

**Department:** [Insert Department]

**Manager/Supervisor:** [Insert Manager/Supervisor Name]

## Introduction

This Performance Improvement Plan (PIP) is designed to provide you with support and guidance in enhancing your job performance to meet the expectations of your role.

## Identified Areas for Improvement

- [Area for Improvement #1]
- [Area for Improvement #2]
- [Area for Improvement #3]

## Performance Goals

1. [Goal #1 with specific criteria]
2. [Goal #2 with specific criteria]
3. [Goal #3 with specific criteria]

## Support and Resources

The following resources will be available to assist you:

- [Resource #1]
- [Resource #2]
- [Resource #3]

## Timeline

This PIP will be in effect from [Start Date] to [End Date]. Regular check-ins will occur every [Frequency of Check-ins].

## **Performance Review**

Your performance will be reviewed on [Review Date]. Based on your progress, further actions may include [Possible Outcomes].

## **Employee Acknowledgment**

By signing below, you acknowledge that you have received this Performance Improvement Plan and understand its contents.

**Employee Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Manager/Supervisor Acknowledgment**

**Manager Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_