

# Performance Improvement Action Plan

Date: [Insert Date]

To: [Employee Name]

From: [Manager/Supervisor Name]

Subject: Performance Improvement Action Plan

## Overview

This action plan outlines the areas of performance needing improvement and the steps that will be taken to support your development.

## Performance Areas for Improvement

- [Specific Area 1]
- [Specific Area 2]
- [Specific Area 3]

## Goals and Objectives

By the end of this action plan, you are expected to:

- [Goal 1]
- [Goal 2]
- [Goal 3]

## Action Steps

1. [Action Step 1]
2. [Action Step 2]
3. [Action Step 3]

## Timeline

This plan will be in effect from [Start Date] to [End Date]. Regular check-ins will occur bi-weekly.

## Support Resources

You will have access to the following resources:

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

## Signatures

By signing below, both parties agree to the terms outlined in this Performance Improvement Action Plan.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_