| **Employee name** |  | **Title** |  | **Department** |  |
| --- | --- | --- | --- | --- | --- |
| **Supervisor name** |  | **Date start** |  | **Date end (3–6 months)** |  |

| **Role expectations**List out the minimum acceptable performance standards for employees in this role. |
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| **Areas in need of improvement**List out the performance areas that are not up to minimum performance standards. Provide any documentation to support your list, such as attendance records, KPIs, performance evaluations, employee feedback, etc. |
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| **List** | **Supporting documents (if any)** |
|  |  |

| **Previous discussions**Note any previous discussions or actions taken to address the performance issues and attach any supporting documentation (such as meeting notes or disciplinary warnings). |
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| **Action** | **List** | **Supporting documents (if any)** |
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| **Improvement goals**Write out SMART goals that address the areas of concern along with how you will measure goal progress. |
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| **Goal no.** | **Goal** | **Goal measurement** | **Area of concern addressed** |
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| **Manager responsibilities**List out how the manager will help their direct report, such as providing access to tools or extra training. |
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| **List** | **Due by date** |
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| **Resources**Provide a list of any resources available to the employee, such as on-demand training courses. |
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| **Resource name** | **Description of resource** |
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| **Goal check-ins**Track progress toward each goal and provide any status, comments, feedback, or notes. |
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| **Goal #1** |
| --- |
| **Check-in date** | **Check-in method** | **Goal activity** | **Expected progress** | **% of goal completion** | **Notes/comments/feedback** | **Employee initials** | **Manager initials** |
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| **Goal #2** |
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| **Check-in date** | **Check-in method** | **Goal activity** | **Expected progress** | **% of goal completion** | **Notes/comments/feedback** | **Employee initials** | **Manager initials** |
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| **Goal #3** |
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| **Check-in date** | **Check-in method** | **Goal activity** | **Expected progress** | **% of goal completion** | **Notes/comments/feedback** | **Employee initials** | **Manager initials** |
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| **Goal #4** |
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| **Check-in date** | **Check-in method** | **Goal activity** | **Expected progress** | **% of goal completion** | **Notes/comments/feedback** | **Employee initials** | **Manager initials** |
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| **Goal #5** |
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| **Check-in date** | **Check-in method** | **Goal activity** | **Expected progress** | **% of goal completion** | **Notes/comments/feedback** | **Employee initials** | **Manager initials** |
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| **PIP expectations and consequences**Outline employee and manager expectations, timelines, and post-PIP actions, including consequences if goals are not met.  |
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|  |

| **Signature and date**By signing and dating below, you agree to the responsibilities and expectations as outlined in this PIP. |
| --- |
| **Employee signature** |  | **Date** |  |
| **Manager signature** |  | **Date** |  |