**Performance Improvement Plan (PIP)**

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| --- | --- |
| **Employee Name:** |  |
| **Supervisor Name:** |  |
| **Date of PIP Review:** |  |

The purpose of this Performance Improvement Plan (PIP) is to address concerns about your work performance and/or misconduct, reset expectations, and offer you opportunities for success. if the employee fails to make improvements as outlined in the PIP, they will be subject to additional disciplinary action, up to and including immediate termination.

**Areas of Concern:**

|  |  |
| --- | --- |
| Attendance and/or Tardiness | Quality of work |
| Conduct | Productivity |
| Other: | Teamwork |

|  |
| --- |
| **Specific examples of behavioral and performance concerns:**  1.  2.  3. |
| **Dates of Previous Counseling and Warnings:**  1.  2.  3. |
| **Goals and Expected Outcomes:**  1.  2.  3. |
| **Plan for Improvement.** List actions that are specific and measurable.  1.  2.  3. |

**Follow-up Plan:**

For the next [*30,60, or 90*] days, [*date, 20\_*\_] to [*date, 20\_\_*], your supervisor will work closely with you to monitor your progress on each of the above items Upon successful completion your supervisor will schedule a follow-up evaluation and continue to support your success in improving performance and maintaining that level of performance. As always, your supervisor is available to discuss any concerns you may have while working on this PIP.

|  |  |  |  |
| --- | --- | --- | --- |
| **Periodic Meetings** | | | |
| Comments | Employee Initials | Supervisor Initials | Date |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

***AT-WILL EMPLOYMENT:*** *To be removed if located in a jurisdiction that does not recognize the at-will employment relationship (e.g., Montana)]:* This PIP is not meant to alter the employment at-will relationship. Either you or [Company Name] may **terminate the employment relationship at any time, for any reason, with or without cause or advance notice. As an at-will employee, it is not guaranteed, in any manner, that you will be employed with**[Company Name] **for any set period of time.**

I understand it is my responsibility to address my performance/conduct, and if I fail to demonstrate improvement as outlined above, I may be subject to further disciplinary action, including termination.

I acknowledge that my supervisor has discussed the items in this warning notice with me and I have a right to respond in writing to the issues outlined above

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Employee Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Supervisor Signature Date