



## PERFORMANCE IMPROVEMENT PLAN

*Use this form when an employee's performance does not meet standards and needs improvement*

### Demographic Data

Employee Name _____	Last	First	MI	Last 4 SSN #	XXX - XX - _____
Supervisor Name _____	Department _____		Department Number _____		
Position Number _____	Job Title _____				
Review Period _____ through _____		Type of Evaluation (select one): <input type="checkbox"/> Mid-Year <input type="checkbox"/> Annual			
Purpose of this PIP: <input type="checkbox"/> Coaching <input type="checkbox"/> Oral Warning <input type="checkbox"/> Written Warning <input type="checkbox"/> Corrective Action Probation <input type="checkbox"/> Documentation of Suspension					

### Section One: to be completed by Supervisor

List the employee's Essential Functions and standards that require attention and describe the specific improvement(s) needed to meet those standards.

<b>Essential Functions:</b>
Job Standards requiring improvement (define the problem):
Specific improvement needed (identify what needs to be done differently):
Steps to achieve this improvement (training, equipment, feedback, etc.):