**Performance Improvement Plan(PIP)**

**Confidential**

**TO: EE Name**

**FROM: Supervisor**

**DATE: Month day, year**

**RE: Performance Improvement Plan (PIP)**

The purpose of this Performance Improvement Plan (PIP) is to defineareas of concern, gaps in your work performance, reiterate the expectations of Bethel College, and allow you the opportunity to demonstrate improvement and commitment.

**Areas of Concern:**

1. *Poor Attitude –*
2. *Respect*
3. *Unprofessional behavior –*
4. *Lack of Engagement*
5. *Poor response*

**Observations, Previous Discussions or Counseling:**

*While previous, informal discussions have taken place, this will serve as our first, official document of your performance, and the need for immediate and sustained improvement.*

**Improvement Goals:** These are the goals related to areas of concern to be improved and addressed:

|  |  |
| --- | --- |
| 1. | Be . . . |
| 2. | Choose . . . |
| 3. | Complete |
| 4. | Maintain |
| 5. | Avoid |

**Follow-up Updates**: You will receive feedback on your progress according to the following schedule:

|  |  |  |  |
| --- | --- | --- | --- |
| **Date Scheduled** | **Activity** | **Conducted By** | **Completion Date** |
| August 1 | 30 – Day Update Memo |  |  |
| Sept 1 | 60 – DayUpdate Memo |  |  |
| Oct 1 | 90 – Day Status Memo |  |  |

**Timeline for Improvement, Consequences & Expectations:**

You are expected to engage in immediate and sustained improvement in the areas listed above. Failure to meet or exceed these expectations, or any display of gross misconduct will result in further disciplinary action, up to and including termination. In addition, if there is no significant improvement to indicate that the expectations and goals will be met within the timelineindicated in this Improvement Plan, your employment may be terminated.Furthermore, failure to maintain performance expectations after the completion of this Performance Improvement Plan may result in additional disciplinary action up to and including termination.

This PIP does not alter the employment-at-will relationship. Additionally, the contents of this Plan are to remain confidential. Should you have questions or concerns regarding the content, you will be expected to follow up directly with your immediate supervisor or the Director of Human Resources.

We will meet again as noted above to discuss your PerformanceImprovement Plan. Please schedule accordingly.

**Signatures:**

Print Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Print Supervisor/Manager Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor/Manager Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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