

Performance Improvement Plan

TO:	
FROM:	
DATE:	
SUBJECT: Performance Improvement Plan	

[REASON FOR PIP]

During the past month [specify dates if available], it has become increasingly evident to your [team leader or supervisor] and me that you have not been performing your assigned work in accordance with what is expected of a[n] [job title]. On [dates of all counseling and verbal warning sessions], you were counseled about this unacceptable performance. To date, there has not been any significant improvement. Company XYZ values you as an employee, and it is your leadership team's intent to make you fully aware of this situation and to assist you in improving your work performance. However, it is important that you realize the responsibility to improve is yours alone.

You are being placed on a written improvement plan. For the next [30, 60, or 90] days, [date, 20___] to [date, 20___], your work will be closely monitored by your leadership team. You must demonstrate immediate improvement in the following areas:

[BODY OF PLAN]

[Identify areas of improvement. Be specific about what needs to be improved. If possible, list objectives with specific deadlines on a separate sheet and attach it to the plan.]

[MONITORING THE PLAN]

[Name the person(s) monitoring the plan] will review your progress on each of the above items requiring improvement every [day or week and time or review]. We trust that in so doing, we can guide you in becoming a contributing employee of Company XYZ.

[OR ELSE]

Improvement must occur immediately and must be maintained. If any portion of this improvement plan is violated at any time during the specified timeframe, disciplinary action to include separation from the company may occur. A decrease in performance after successfully completing the improvement plan



Performance Improvement Plan

may result in being dismissed from improvement plan.	Company XYZ	without th	e issuance	of another	warning or
[CLOSING]					
As always, the Open Door Policy is availa	able for you to	discuss any c	oncerns.		
Your signature acknowledges this discus plan.	ssion. It does n	ot indicate a	agreement o	or disagreeme	ent with this
Performance Improvement Plan					
Your signature acknowledges this discus plan.	ssion. It does n	ot indicate a	agreement o	or disagreeme	ent with this
	_				
Employee Signature		Date			
Manager Signature	-	Date			

Date

Witness Signature