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**Performance Improvement Plan (PIP)**

**Employee Name:**

**Position Title:**

**Date Issued:**

**Review Period:** \_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_

**Manager/Supervisor:**

**Department:**

The purpose of this Performance Improvement Plan is to address and correct recent concerns regarding your performance. The following are example behaviors that now require your placement on a Performance Improvement Plan:

**Performance Improvement Area #1:**

Specific performance concern (s):

Steps to take to improve this area:

Support to be provided by Manager/Supervisor:

Time frame for completion:

Desired results:

Follow-up review date(s):

**Performance Improvement Area #2:**

Specific performance concern (s):

Steps to take to improve this area:

Support to be provided by Manager/Supervisor:

Time frame for completion:

Desired results:

Follow-up review date(s):

**Performance Improvement Area #3:**

Specific performance concern (s):

Steps to take to improve this area:

Support to be provided by Manager/Supervisor:

Time frame for completion:

Desired results:

Follow-up review date(s):

**Performance Improvement Area #4:**

Specific performance concern (s):

Steps to take to improve this area:

Support to be provided by Manager/Supervisor:

Time frame for completion:

Desired results:

Follow-up review date(s):

The Company will monitor your performance and have a follow up meeting with you in 30 days. Please understand that you must adhere to the above standards immediately. Any future performance issues will result in further disciplinary action up to and including termination. If it appears that you are not adhering to these standards at any time, the Company reserves the right to terminate the employment relationship immediately. This is an employment at-will relationship and this disciplinary action does not modify that relationship in any sense.

**SIGNATURES:**

I have received a copy of this Memorandum. I understand its contents and agree to abide by the

conditions set forth above.

**Employee Signature: Date:**

**Employee Signature: Date:**

**Head of HR Signature: Date:**