



## Performance Improvement Plan

Date: Date

To: John Doe

From: Direct Supervisor

VP

Director of Human Resources

Subject: Performance Improvement Plan

The purpose of this letter is to emphasize the ongoing deficiencies in your conduct/performance in the \_\_\_\_ department and to confirm in writing our discussion on Date, regarding your performance at work. This letter hereby establishes expectations outlined in a Performance Improvement Plan which should be commenced immediately. This plan has been developed as a corrective measure to assist you in bringing your performance level up to standard.

The PIP will be placed in your personnel file and will be the only written warning notice you will receive in this specific situation. Failure to correct your conduct/performance within the specified timeframe can lead to termination of employment/reassignment within the college.

Performance deficiencies and dates

Corrective Action Required:

Effective immediately, you are placed on this PIP. During this time, you will be expected to make regular progress on the plan outlined above. Failure to meet or exceed these expectations, or any display of misconduct may result in disciplinary action, up to and



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including termination. In addition, if there is no significant improvement to indicate that the expectations and goals will be met within the timeline indicated in this PIP, disciplinary action may be pursued prior to the PIP's end date. Finally, failure to maintain performance expectations after the completion of the PIP may result in additional disciplinary action up to and including termination.

The PIP does not alter the employment relationship in accordance with your employee category. Should you have questions or concerns regarding the content, please follow up directly with your supervisor.

Period Review Dates

30-day update memo-

60-day update memo-

90-day update memo-

We will update your progress and meet (if needed) as noted above to discuss your Performance Improvement Plan.

My supervisor has discussed the above performance improvement plan with me. I understand and acknowledge the contents and the potential consequences of non-compliance.

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Employee Signature

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Date

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Supervisor Signature

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Date

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HR Witness Signature

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Date