

## PRACTITIONER TOOL

# Performance Improvement Plan

*A structured framework for documenting performance gaps, setting expectations, and creating a defensible path forward.*

<b>Employee Name:</b>	
<b>Position / Department:</b>	
<b>Manager / Supervisor:</b>	
<b>Date PIP Initiated:</b>	___ / ___ / _____
<b>Plan Duration:</b>	(Usually 30, 60, or 90 days)
<b>Review Dates:</b>	(List interim checkpoints and final review date)

## Purpose

You are receiving this Performance Improvement Plan because your current performance does not meet established expectations for your role.

The purpose of this plan is to clearly outline the specific areas that need improvement, the standards you are expected to meet, and the support that will be provided to help you get there.

**This is an opportunity to succeed.** However, failure to demonstrate and sustain the required improvement within the timeframe below may result in further disciplinary action, up to and including termination of employment.

## Summary of Concern

*Describe the performance concern(s) that prompted this PIP. Be specific: reference dates, incidents, prior conversations, and the gap between current performance and expected standards.*

## Performance Areas Requiring Improvement

Area of Concern	Current Performance	Expected Standard	Measurement Method

## Performance Goals & Action Steps

Lay out specific actions the employee must take to meet expectations, along with who is responsible and by when.

Goal	Action Step	Responsible Party	Target Date

## Support & Resources Provided

*List what tools, training, mentoring, or guidance will be offered to assist the employee. Documenting support is critical — it demonstrates good faith and due process.*

## Follow-Up & Evaluation Plan

Describe how progress will be monitored and communicated. Regular check-ins are essential — both for the employee's success and for the defensibility of the process.

Date	Review Focus	Progress Summary	Manager Notes

● **On Track** — Meeting or exceeding goals

● **Partial Progress** — Improvement seen, not yet consistent

● **Not Improving** — No measurable progress

## Expected Outcome

*Describe the specific outcome expected at the end of the PIP period if the employee meets all stated goals. Also note the consequence if improvement is not demonstrated and sustained.*

## Employee Acknowledgment

By signing below, you confirm that this Performance Improvement Plan has been reviewed and discussed with you. Your signature indicates acknowledgment and understanding of the expectations and timeframes outlined in this plan. **Signing does not indicate agreement with the assessment — only that the plan has been received and explained.**

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

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

## Final Review

Completed by Manager / HR at the conclusion of the PIP period.

Review Date	Final Rating	Summary of Results	Decision

**Manager Signature:** \_\_\_\_\_

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

For informational purposes only. Not legal advice. Consult qualified employment counsel before implementing any performance improvement or separation action.

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