



Performance Improvement Plan (PIP)

Employee Name:	Job Title:
Supervisor/DC/PD/Dean:	Department/Office:
PIP Time Frame:	Discussion Date:
1. Statement of performance concern(s)	
<i>Include specific examples and/or data to support concern(s) being discussed.</i>	
2. Impact on the department/institution	
<i>Describe how this is impacting the team/department/university.</i>	
3. Supervisor expectations	
<i>Specific performance and/or behavior changes that must take place. Include date behavior change must be exhibited by.</i>	
Consequences if expectations are not met: Failure to meet and sustain improved performance/behavior change may lead to further disciplinary action, up to and including termination. Corrective action may be taken in conjunction with, during, or after the performance plan.	
4. Employee Comments	
<i>Employee may insert comments or additional information as related to this PIP here:</i>	
5. Follow up	
<i>Measurement of progress to be discussed on these date(s):</i>	
Employee Signature:	Date:
Supervisor Signature:	Date:

Note to supervisor: Please provide a copy of this completed PIP to the office of people and culture/HR for the employee's file.

Revised: August 2023