



Your Agency Letterhead

Job Performance Improvement Plan
RE: **(Employee Name), (Employee ID)**
(DATE)

I. Performance Deficiency: **(Describe the specific area for improvement and cite examples)**
Goal: **(State the level of work performance expected)**

Behavioral Actions Steps:

- a)
- b)

- State how progress will be measured
- State how and when you will provide feedback (including meeting timeframes, dates, frequency)

II. Performance Deficiency: **(Describe the specific area for improvement and cite examples)**
Goal: **(state the level of work performance expected)**

Behavioral Actions Steps:

- a)
- b)

- State how progress will be measured
- State how and when you will provide feedback (including meeting timeframes, dates, frequency)

I verify by my signature below that this Job Performance Improvement Plan has been addressed with me and I have received a copy. I further understand that if these performance deficits are not corrected, I may receive disciplinary action up to and including termination.

Employee signature

Date

Supervisor

Date