ALMA COLLEGE

Performance Improvement Plan

For _____

(Employee Name)

This performance improvement plan has been developed to document and communicate concerns regarding your job performance or inappropriate work-related behaviors. Please review it carefully as it is an important step in the college's performance review process for staff.

Identify the area of concern	Desired Improvement Goals	Review Date/ Follow Up

We recognize that you may have additional ideas to improve your performance. Therefore, you may provide your own Performance Improvement Plan input on a separate document and submit it to your supervisor within 7 days of receiving this plan. Your feedback will be included in your personnel file as an attachment to this document.

Outcomes and Consequences

Positive: If you meet the performance goals established above and maintain the required improvement, no further disciplinary action will be taken regarding this issue.

Negative: If you are unable to meet performance requirements by the scheduled review date, you will be subject to further disciplinary actions, up to and including termination of employment. A copy of this document will be placed in your personnel file in the Human Resources Department.

Other Resources

If you believe that outside counseling would assist you in improving your performance, please contact the Employee Assistance Program. This is strictly voluntary and confidential. The college will not be informed that you have contacted them.

Employee Acknowledgement

This Performance Improvement Plan has been reviewed with me and I have had an opportunity to ask questions to make certain that I understand the expectations. By signing this, I agree to follow Alma College standards of performance and conduct.

_____ _____

Employee Signature Date

Supervisors' Name and Title: (please print) _____

_____ _____

Supervisor Signature Date

Distribution of copies: _____ Employee

_____ Supervisor

_____ Human Resources