



## PERFORMANCE IMPROVEMENT PLAN

Name	Date		
Created by			
Improvement Goa	als/Outcomes – Behavior or Competer	ncy	
		1	
Interventions		Supervisor	Timeline
Assessment Evid	What do you see? What do you hear?	es are met?	
Observations vvnat do you see? vvnat do you near?			
		-410-00	
Product	Is there something to be submitted/exped	cted? Surveys?	
Conversations	Who will the supervisor talk to about the	improvement?	
Conversations			



## Acknowledgement

I acknowledge that I have read and understand the content of this performance improvement plan.

To sign the form electronically, complete the document in Word and save as a PDF. Open the PDF, go to Tools (Top-Tab), select Certificates, select Digitally Sign (Top-Tab) and then sign the form by dragging your cursor in the appropriate space.

Emp	loyee's Signature	Date		
	inistrator's ature	Date		
Supe	erintendent	Date		
FOLL	OW UP			
Date:		<del></del>		
	Satisfactory Progre	ress: Employee has made satisfactory progress regarding concerns.		
		ess: Employee has made some progress regarding concerns, but that progress is ontinuation of this Performance Improvement Plan (PIP), or the creation of a new		
		ory Progress: Employee has not made satisfactory progress regarding concerns. commendations will be made to the Director of Education/Superintendent of Human		
Comm	nents			





## **Acknowledgement**

I acknowledge that I have read and understand the content of this appraisal, but this does not necessarily indicate that I agree with its content.

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Employee's Signature	Date
Administrator's Signature	Date
Human Resources	Date

Updated: November 2019, July 2025

Reviewed: October 2022