

A.2. Performance Improvement Plan

Name:					
Line Manager/ Supervisor:					
Stage/ Date	Performance Objective to be met <small>What are the specific issues to be addressed</small>	Improvement Required <small>Success criterion/ what progress is expected</small>	How will this be met/ Any support required? <small>Method of achieving performance/ when/who will be responsible</small>	Timescale/ Target Date for Completion	Review Outcome <small>Comments/ Review Notes/ any additional action</small>

Jointly Agreed By:

Line Manager/Supervisor: _____ Employee: _____