

**CSUB FOUNDATION
PERFORMANCE IMPROVEMENT PLAN (PIP)**

Name:

Job Classification/Working Job Title:

Dept.:

Supervisor:

This form documents a plan for required performance improvement when a staff member's overall performance does not meet minimum expectations as identified on the Performance Evaluation Report. This is intended to make you fully aware of this situation and to assist you in improving your work performance in specific area(s) outlined in this plan where performance does not meet expectations and action needs to be taken.

You are being placed on a written performance improvement plan for the next (##) days, from (starting date) to (ending date). Your supervisor will closely monitor your work and you must demonstrate immediate improvement.

During the next (##) days we will have one-on-one meeting(s) to review your performance and to provide feedback about your progress towards the specific improvements required. Our meeting dates/times are as follows:

Date:	Time:
Date:	Time:
Date:	Time:

Immediate improvement in the stated areas is the goal of the plan. It is your responsibility to communicate with me at any time between these meeting(s) if you need guidance or support to achieve these goals.

I have received and read this Performance Improvement Plan. I understand that failure to meet the performance improvements outlined above may result in the termination of my employment with CSUB. I understand that I have a continued responsibility to comply with university policies and procedures, and that my employment remains subject to termination for cause and/or performance.

Date

Signature of Employee

Signature of Appropriate Administrator

PERFORMANCE IMPROVEMENT PLAN DETAIL

Performance evaluation factor(s) or area(s) of concern:
Job expectation(s) related to performance evaluation factor(s) or area(s) of concern:
Supervisor's assessment (description of specific performance deficiencies):
Specific improvement(s) required (include date for follow-up & timeframe for improvement):

Performance evaluation factor(s) or area(s) of concern:
Job expectation(s) related to performance evaluation factor(s) or area(s) of concern:
Supervisor's assessment (description of specific performance deficiencies):
Specific improvement(s) required (include date for follow-up & timeframe for improvement):

Performance evaluation factor(s) or area(s) of concern:
Job expectation(s) related to performance evaluation factor(s) or area(s) of concern:
Supervisor's assessment (description of specific performance deficiencies):
Specific improvement(s) required (include date for follow-up & timeframe for improvement):

USE ADDITIONAL SHEETS, IF NECESSARY