|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name** |  | **Date** |  |
| **Job Title** |  | **Department (if applicable)** |  |
| **Manager Name** |  | **Hire Date** |  |
| **Area of Concern** **(Describe Area of Concern)** |  |
| **Goal of the Plan** **(Overall aim of the plan)** |  |
| **Plan Start Date** |  | **Plan End Date** |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **ACTION** | **OBJECTIVE** | **MEASUREMENT** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |

|  |
| --- |
| **Follow up Comments:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Employee Signature Manager Signature Date**