Clarification of Expectations Plan

Employee:				
Supervisor:				
During the period of concerns with your of	key areas of your role foverall performance a	ed to focus your attention on sul as, I have discussed nd effectiveness. The following is d my recommended corrective a	with you on several occasions my sa summary of the concerns we	
Date of Discussi	on Performa	nnce Concerns Discussed	Agreed Future Outcomes/Actions	
performance expect	ations. Over the next		nsibilities in which you are not meeting nd show significant progress in these ement.	
Key	Area of Deficiency	Expected Improvement	Timeframe To Achieve	
Responsibility	•	(Goals)	Improvement Goal	



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It is your responsibility to notify me if at any time during this time period you need any resources and/or assistance in removing any barriers you may encounter which may impede your progress.
Significant progress and improvement must be attained and sustained. This Clarification of Expectations Plan may be modified as necessary during this period, depending on your progress. Failure to achieve expected improvement will result in further formal corrective action that may ultimately lead to termination.
Employee Signature:
Supervisor Signature:

We will meet weekly to review your progress on the following dates and times:



Clarification of Expectations Plan Progress Report

Name of Employee:	Supervisor:

Date	Area of Deficiency	Expected Improvement	Updated Progress	Comments, Feedback, Agreed Upon Plans
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