

# CREIGHTON ELEMENTARY SCHOOL DISTRICT No. 14

## Educational Support Personnel Performance Improvement Plan

Date of Evaluation Interview with Employee: \_\_\_\_\_ School/Unit: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Position \_\_\_\_\_

The Performance Improvement Plan should include a timeline for correcting performance deficiencies; description of performance deficiencies; how the employee can demonstrate a "Satisfactory" level of performance; the date/schedule for the next meeting(s) to check the progress of the employee in meeting the requirements of the plan.

### **PERFORMANCE DEFICIENCIES:**

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### **ACTION STEPS FOR IMPROVEMENT:**

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**TIMELINE TO ACCOMPLISH COMPLETION OF DEFICIENCIES:**

Completion Date: \_\_\_\_\_

Comments:

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**FUTURE MEETING DATES TO MONITOR EMPLOYEE PROGRESS:**

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Comments:

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I have reviewed this Professional Improvement Plan and agree with the accomplishment date (4) above. I understand that failure to satisfy the P.I.P prior to the end of the school year may result in not receiving Level Advancement or Pay for Performance.

\_\_\_\_\_  
Signature of Evaluator

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date