EMPLOYEE PERFORMANCE REVIEW SYSTEM

REMEDIAL DEVELOPMENT PLAN

Employee Name:_____ Supervisor:_____

Agency:_____ Location:_____

Position:_____

Evaluation Year:___FY_____ Date of Plan:_____ Plan Effective as of:_____

Part I

Remedial Action Plan

The above named employee has received a rating of "Below" at ☐ Stage B ☐ Stage C.

In order to attain a "Meets"/ rating at the next performance review meeting, the employee must:
(List specific actions that the employee must take in order to attain a "Meets" rating. List the criteria that will measure the progress of each specific action.)

- **Action:**

  Criteria:

- **Action:**

  Criteria:

- **Action:**

  Criteria:

- **Action:**

  Criteria:

The success of this plan will be reviewed every thirty (30) days, until a rating of "Meets" is achieved.

The date of the next review has been scheduled for:____/____/____ (no more than 30 days from the Date of Plan).

_____ _____ _____

Employee Signature/Date Supervisor Signature/Date Reviewer Signature/Date

Part II (Completed up to 30 days after the RDP was implemented)

Evaluation of the Remedial Development Plan

Employee ☐ did ☐ did not receive a rating of "Meets".

☐ The Remedial Development Plan was successful.
☐ The Employee needs to continue with the Remedial Development Plan until the time of the next review (no later than 30 days).

_____ _____ _____

Employee Signature/Date Supervisor Signature/Date Reviewer Signature/Date