

**EDUCATIONAL SUPPORT PERSONNEL PLAN OF ASSISTANCE**

Employee \_\_\_\_\_ Date: \_\_\_\_\_

It has been determined that your performance needs special attention and assistance. This is a statement of these needs and a plan to overcome them.

- 1. Certain skills and knowledge are found to need improvement based upon these observable conditions:

The Standard(s) which need attention at this time are:

Standard(s) \_\_\_\_\_

Indicators \_\_\_\_\_

- 2. The program designed to bring about this improvement includes: (This should involve specific statements of things to be done that may be demonstrated by observable data.)

The above will be accomplished or noticeable improvement achieved on or before \_\_\_\_\_, by which time we will confer to determine whether your performance has been satisfactory or unsatisfactory.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Supervisor's Signature

(Does not necessarily mean agreement, but indicates the report has been read and discussed,)

Employee comments (if desired):

Plan of Assistance completed: Yes\_\_ No\_\_ Plan of Assistance to be continued: Yes\_\_ No\_\_

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

White Copy: Employee

Yellow Copy: Supervisor

Pink Copy: Employee's File