



Poor Work Performance Notification

Summer Youth Internship Program

Intern Name _____ Date _____

Employer _____

Supervisor Name _____

As an intern of the CSP's Summer Youth Internship Program, you are aware of your work related responsibilities and program expectations related to your work performance. During a recent evaluation period or as it relates to a critical incident, you have shown less than acceptable performance in the following area(s):

Not demonstrating positive work attitude and behavior

Not presenting appropriate appearance

Not exhibiting good interpersonal skills

Problems with Supervisor Problems with Co-workers

Describe:

Not completing work tasks effectively

Describe:

Not being punctual (Dates and Description):

Not attending work as scheduled (Dates and times of non-attendance) _____

Other

Based on the above, the following behavior changes must be demonstrated to maintain your employment:

If you do not improve your work behavior over the next week to an acceptable level of performance, you will be terminated from participation in the internship component of the Summer Youth Internship Program.

Signature - Summer Intern

Signature – CSP Staff

Signature – Worksite Supervisor