



Employee Name:	
Dept:	
Job Title:	
Manager:	
Goal #1:	
Sub-goals or steps	to achieve if needed:
Monthly check-in no	otes:

Goal #2:	
Sub-goals or steps to achieve if needed:	
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Monthly check-in notes:	
monthly check-in notes.	

Goal #3:	
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Sub-goals or steps to achieve if needed:	
Oub-gould of Steps to define ve if fleeded.	
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Monthly check-in notes:	

oal #4:
ub-goals or steps to achieve if needed:
onthly check-in notes:

Goal #5:
Sub-goals or steps to achieve if needed:
Monthly check-in notes: