emplates and policies from Eye Care Collective are provided for members and their ractice of our service. Members and their practices may use this document as is, or a starting point for their own documents. Eye Care Collective assumes no responsibilit r the enforcement or effectiveness of its templates and policies.	s y

Extension to Probationary Period - Performance

(Name of Manager)
(Title)
(Phone Number)
(Email)
(Date)
(Recipient Name)
(Title)
(Practice Name)
Dear (Recipient Name),
As per our discussion regarding your failure to meet the expected performance goals associated with your position, please be advised that we have elected to offer you the opportunity to improve your performance and maintain your employment with (Practice Name).
As part of the agreement to continue your employment with (Practice Name), you will be expected to participate in a Performance Improvement Plan (PIP), reporting your activities to (Name, Title, Appropriate Authority) on a (State levels of interval – e.g. daily, weekly, etc.) basis
In pursuance to your participation in the PIP, please be advised that we have deemed it necessary to extend your probationary period for a duration of (Insert appropriate extension, e.g. 3 months, 6 months, or 9 months). During this probationary period, (Practice Name) may elect to sever the employment relationship at any time, based on your ability to meet expectations as stated within the PIP, and the timely, efficient and effective performance of the job duties as stated in your job description/employment contract. If during the extended probationary period the employment relationship is severed for any reason, your eligibility will be limited to the minimum notice requirements under the Employment Standards Act.
Sincerely,
(Name of Manager)
(Title)