Employee Coaching

Employee Information	
Name:	
Position:	
Department:	
Coaching Date:	
Coach/Manager:	

Coaching Objectives

Objective 1:

Objective 2:

Objective 3:

Performance Assessment

Strengths

1.

2.

Areas for Improvement

1.

2.

Action Plan

Action Item 1

- Description:
- Deadline: ______

Action Item 2

- Description:
- Deadline: ______

Feedback and Support

Feedback provided during session

1.

2.

Support required

1.

2.

Progress and Follow-Up

Progress Review Date: _____

Notes from Follow-Up Session

1.

2.

Coach/Manager Signature: _____

Employee Signature: _____