



# Team Member Assistance Plan (T-MAP)

Thrive Community Church

Team Member Name: \_\_\_\_\_ Date: \_\_\_\_\_

Oversight Name/Position: \_\_\_\_\_

The purpose this plan is growth for team members of Thrive Community Church who are in need of refinement in a specific area. These areas of refinement are necessary to fulfill your specific responsibilities as well as uphold the culture of Thrive Community Church.

## **Description of need for plan**

## **Prior Discussion (related to refinement plan)**

## **Summary of plan for refinement**

## **Specific steps and timeline of plan**

Steps	Time Frame	Mentor Assigned to Step	Date Step Completed
1.			
2.			
3.			
4.			

**Mentor Comments:**

*In the event the team member is not willing/able to adhere to the plan above, the team member may be reassigned, dismissed of responsibility or assigned to a future improvement plan to accomplish the necessary refinement.*

Team Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mentor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Oversight Signature: \_\_\_\_\_ Date: \_\_\_\_\_