



Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Department: \_\_\_\_\_

Verbal Warning: \_\_\_\_\_ 1<sup>st</sup> Written Warning: \_\_\_\_\_ 2<sup>nd</sup> Written Warning: \_\_\_\_\_

Your behavior/actions have been found unsatisfactory for the following reasons:

- Tardiness
- Absenteeism
- Policy Violation
- Insubordination
- Performance
- Safety Violation
- Other

Details of the event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The following corrective action is expected from the employee. Failure to do so will result in further disciplinary action up to and including termination: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Deadline to correct behavior/action: \_\_\_\_\_

Your signature on this form means that you discussed the incident with your supervisor, it does not mean you agree or disagree.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_