

EMPLOYEE DISCIPLINE FORM

Employee: _____ Title: _____

Supervisor: _____ Title: _____

Type of Disciplinary Action

(Check only one)

_____ Counseling _____ 1st Written Warning
_____ 2nd Written Warning _____ 3rd Written Warning
_____ Termination

Previous Disciplinary Action Issue

(List date(s) and Type issued only)

Date: _____ Type Issued: _____

Date: _____ Type Issued: _____

Date: _____ Type Issued: _____

Date: _____ Type Issued: _____

Explain Behavior or Performance

(List date(s) & approximate time(s). Explain who, what, why and where. Only facts)

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