

Disciplinary Action Form

Employee
Name

Date

Department

Your performance was found unsatisfactory for the reason(s) set forth below:

Oral
Warning

Written
Warning

Written Warning
& Suspend

Final
Written

Discharge

Details

Your failure to improve or avoid a recurrence will be cause for further disciplinary action in accordance with company policy.

Date of next meeting
for follow-up

Improvement Plan

A copy of this warning was personally delivered to the above employee by:

I have received and read this warning. I have been informed that a copy of this notice will be placed in my personnel file in HR.

Supervisor

Date

Employee Signature

Date
