

EMPLOYEE INFORMATION

EMPLOYEE NAME: _____

DATE: _____

JOB TITLE: _____

DEPARTMENT: _____

EMPLOYEE INFRACTION

- TARDINESS
- ABSENTEEISM
- INSUBORDINATION
- MISCONDUCT
- POOR PERFORMANCE
- HEALTH AND SAFETY VIOLATION
- AGENCY POLICY VIOLATION
- OTHER

DESCRIPTION OF INFRACTION *(include specific actions, inactions and/or conduct with dates)*

DISCIPLINARY ACTION

- VERBAL WARNING
- WRITTEN WARNING
- MODIFIED DUTY *(terms required below)*
- SUSPENSION FROM ____ DAYS FROM ____ TO ____
- SUSPENSION PENDING INVESTIGATION *(may result in termination)*
- FINAL WARNING
- TERMINATION

