



EMPLOYEE DISCIPLINARY ACTION FORM

Employee: _____

Date of Warning: _____

Department: _____

Supervisor: _____

TYPE OF VIOLATION:

WARNING:

Attendance Carelessness Disobedience

Violation Date: _____

Safety Tardiness Work Quality

Violation Time: (a.m. / p.m.) _____

Other _____

Place Violation Occurred: _____

EMPLOYER STATEMENT

EMPLOYEE STATEMENT

WARNING DECISION

Approved by: _____

Name	Title	Date
------	-------	------

List All Previous Warnings (when warned and by whom):

Previous Warning: 1st Warning

 Date _____

 Verbal _____

 Written _____

Previous Warning: 2nd Warning

 Date _____

 Verbal _____

 Written _____

Previous Warning: 3rd Warning

 Date _____

 Verbal _____

 Written _____

I have read this "warning decision". I understand it and have received a copy of the same.

Employee Signature Date

Signature of person who prepared warning Date

Supervisor's Signature Date

COPY DISTRIBUTION

Employee HR Dept Supervisor