



11555 Old Oregon Trail
Redding, CA 96049-7007

Student Employee Warning Notice

Employee Information

Student Name: _____ Date: _____
 Student ID: _____ Job Title: _____
 Work Coordinator: _____ Department: _____

Type of Warning

First Warning Second Warning Final Warning

Type of Offenses

Tardiness/Leaving Early Absenteeism Violation of College/Office Policies
 Substandard Work Violation of Safety Rules Rudeness to Customers/Coworkers
 Other: _____

Details

Description of Infraction:

Plan for Improvement:

Consequences of Further Infractions:

Acknowledgment of Receipt of Warnings

By signing this form, you confirm that you understand the information in this warning. You also confirm that you and your work coordinator have discussed the warning and a plan for improvement. Signing this form does not necessarily indicate that you agree with this warning.

Student Signature Date

Work Coordinator Signature Date

Witness Signature (if employee understands warning but refuses to sign) Date