

Decatur Township Fire Department

Notice of Disciplinary Action

Form 01-102006

Date

Name

Rank

The following Disciplinary Action has been entered in to your :

Immediate Supervisor's file

Department Personnel File

Action Taken:

Written Warning

Suspension Pending Further Investigation

Written Reprimand

Demotion Recommended

Suspension With Out Pay

Dismissal Recommendation

Total Wagees Forfeited (List Number of Hours)

Suspension Scheduled For (Date)

Stating Time of Suspension

Ending Time of Suspension

Date of Violation:

The above disciplinary action is based on the following specific rule violtion:

Detailed description of violation:

Officer's Signature: _____ Date: _____

Fire Chief's Signature: _____ Date: _____

My signature certifies that I have been notified of disciplinary action taken against me. I understand that I have rights to an appeal and that I have the right to have Union representaion. I also understand that I must notify the Chief in writing within 48 hours if I choose to appeal. Also by signing, I am not admitting to or agreeing with the action filed or taken against me.

Printed Name: _____ Rank: _____

Signature: _____ Date: _____