



Employee Disciplinary Action Notice

Client Name: _____

Employee Name: _____ Department: _____

Supervisor Name: _____ Date of incident: _____

Reason for Discipline:

- | | | |
|---|--|--|
| <input type="checkbox"/> Attendance | <input type="checkbox"/> Unsatisfactory work quality | <input type="checkbox"/> Insubordination |
| <input type="checkbox"/> Tardiness | <input type="checkbox"/> Violation of company policy | <input type="checkbox"/> Early quit |
| <input type="checkbox"/> Misuse of company property | <input type="checkbox"/> Violation of safety rules | <input type="checkbox"/> Other: _____ |

Warning Type:

- | | | | |
|---------------------------------|--------------------------------|---------------------------------|--------------------------------|
| <input type="checkbox"/> Verbal | <input type="checkbox"/> First | <input type="checkbox"/> Second | <input type="checkbox"/> Final |
|---------------------------------|--------------------------------|---------------------------------|--------------------------------|

Action taken:

- | | | | |
|----------------------------------|------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Warning | <input type="checkbox"/> Probation | <input type="checkbox"/> Suspension | <input type="checkbox"/> Other: _____ |
|----------------------------------|------------------------------------|-------------------------------------|---------------------------------------|

Employer Statement:

Objectives (required performance level):

Solutions (agreed upon actions):

Consequences should objectives not be met:

Employee comments:

Employee Acknowledgement:

My signature indicates that this notice has been discussed with me and that I understand its contents.

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

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