



# TOWN OF NATICK EMPLOYEE DISCIPLINARY ACTION SHEET

Employee Name: Last \_\_\_\_\_ First \_\_\_\_\_ Employee ID: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Department: \_\_\_\_\_

Violation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Violation Time: \_\_\_\_\_ a.m. / p.m. Location: \_\_\_\_\_

**ACTION TAKEN: Check One** (Depending on the nature of the offense, the Town of Natick reserves the right to skip any steps at its discretion.)

Oral Reprimand  Written Reprimand  Suspension \_\_\_\_ day(s)  Other \_\_\_\_\_

**RULE, REGULATION, OR POLICY VIOLATED: Check One**

Tardiness  Attendance  Conduct  Insubordination  Disobedience  Drug or Alcohol Abuse  
 Safety  Carelessness  Quality of Work  Quantity of Work  Other \_\_\_\_\_

**EXPLANATION FOR ISSUING REPRIMAND:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CORRECTIVE ACTION REQUIRED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYEE COMMENT:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

You are formally being warned to bring to your attention the severity of this situation. Failure to correct this behavior and/or further violation will result in additional disciplinary action up to and including termination. By signing below you are acknowledging that you have read and received this notice.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the Director of HR

\_\_\_\_\_  
Date