WARNING FORM (HR-D-5)



Name of Employee	Name		Surname	Surname	
Employee No.		Position			
Date of Warning		Place of \	Place of Warning		
Previous corrective action:					
Previous warnings :					
This is a		Valid for	—		
Type of misconduct (refer to Disciplinary Code)					
Details:					
Additional Pages added					
NOTE		Copy of form must be placed on employee file and removed once varning expires.			
Employer Date Sie	gnature Date	Employee Signat	ure Date	Witness Signature	
(If applicable) The warning was read to the employee but employee refuses to sign Yes No					
The warning has been read to the employee and is fully understood. He/She is aware of the contents of this form and acknowledges receipt of a copy. The signature of the employee signifies that he/she has received the notice of disciplinary action, whether or not he/she agrees with such action. Failure of the employee to sign this notice does not invalidate it.					

