

OFFICE USE OF	NLY:
Human Resources red	c'd on:

EMPLOYEE COUNSELING/WARNING NOTICE

Employee:	:	Position:		Today's Date	:
Violation l	Date: Violation Time:		am pm V	iolation Location:	
Type of N	otice:				
	☐ Counseling		Final W	arning: without suspension	
	☐ 1 st Written Warning		Final W	arning: with suspension of	days
	☐ 2 nd Written Warning		Dischar	ge recommended	
Check here	e if this is in response to a SIRC recom	mendatio	n		
If the infr	ction of agency policy or practice ma action is of a severe nature any or all Deficiency: (Please check)				termination
	Insubordination		_	Training	
	Attendance/Tardiness/Unauthorized Early	y Quit	_	Failure to Follow Directions	
	Unsatisfactory Work Quality		_	Violation of Agency's Policy a	and Practices
	Inappropriate use of Language			Neglect of Duty	
	Other:				
1.	I have made the following observation	of emplo	oyee's con	duct:	
2.	Corrective action to be taken:				

3	These standards are important because of the following impact on the work environment:			
4.	Employee requires re-training in the area of:			
	Supervisor has contacted training on: Date:			
5.	I have advised employee of the following consequences if employee fails to follow the abostandards:			
6.	This matter will be reviewed within weeks (If approprise			
Supe	ervisor Sign Here:	Date:		
Dep	t. Head or Designee:	Date:		
	I have read and fully understood the above warning.			
	I have read and do not agree with the above warning. (AttaclI request that this warning be reviewed by Employee Relati			
Етр	oloyee Sign Here:	Date:		
he ei	mployee refuses to sign:			
	is is to certify that the employee named in this report was warned be sence concerning the subject matter contained therein."	by his/her supervisor in my		
Witne		Data:		