



Employee Warning Notice Form

Date: _____

Employee Name:	
Location:	
Manager Name:	
Type of Warning:	<input type="checkbox"/> First Warning <input type="checkbox"/> Second Warning <input type="checkbox"/> Other
Previous Discipline was held on:	
Details of unsatisfactory behavior/actions:	

The following immediate and sustained corrective action must be taken by the employee. Failure to do so will result in further disciplinary action up to and including termination.

Corrective Action required:	
Follow up meeting:	
Proposed action if employee fails to take corrective action:	
Employee Signature:	X _____ Date: _____ <small>By signing this form, you confirm that you understand the information in the Warning. You also confirm that you and your Manager have discussed the Warning and a plan for improvement. Signing this form does not necessarily indicate that you agree with the Warning.</small>
Manager Signature:	X _____ Date: _____
Witnesses to Warning:	