



EMPLOYEE CORRECTIVE ACTION NOTICE

Employee: _____ Supervisor: _____

Position Title: _____ Department: _____

Date of Counseling: _____

Type of Notice:

- Verbal Counseling, Written Warning, Final Warning, Termination Notice

Reason for Counsel:

- Attendance, Tardiness/Leave Early, Work Performance, Conduct, Violation of University Policy, Other:

Prior Corrective Action for the same or another offense was issued on: _____

Description of Performance Issue or Infraction (Specify dates and details of incident):

Dates(s) of Incident(s): _____

Plan for Improvement or Recommendations (include timeframe):

Expectations:

Consequences if satisfactory correction or improvement is not made:

Failure to immediately and on a sustained basis adhere to the above mentioned improvement plan and expectations (or violation of any other University policy) may result in further disciplinary action up to and including termination of employment.

Employee Acknowledgment

Your signature below indicates that you have received a copy of this corrective action notice. It does not necessarily indicate you agree with it.

I am in receipt of this warning notice:

Employee's Signature

Date

Supervisor's Signature

Date

Employee Comments (optional)

(Attach additional sheets if needed.)

Distribution:

Employee Name:

Immediate Supervisor:

PEC Member:

Personnel File – Office of Human Resources