

COMPANY	<input type="text"/>
DIVISION	<input type="text"/>
BUSINESS UNIT	<input type="text"/>
OPERATING UNIT	<input type="text"/>

Personal Details

Surname

First names

Job title

Employee number

Date of Hearing Time of Hearing

Venue

Date notice issued

In terms of the Company's Disciplinary Code and Procedure, you are hereby advised that a Disciplinary Hearing will be held on the above date, at which you have to present yourself.

1. At this Hearing, you have the right to be accompanied and / or represented by an available colleague / representative of your choice from the workplace, who must be an employee of the company.
2. You have the right to submit any written statements you wish.
3. Should you require an interpreter, please advise at least twelve (12) hours prior to the Hearing.
4. You have the right to call any witness you may require.
5. You are required to advise me of the names of your representative and your witness at least twelve (12) hours before the Hearing commences.
6. Should you not be able to attend this Hearing, you are requested to advise me of the reasons at least twenty-four (24) hours prior to the Hearing. This is in order that a decision can be taken as to whether the Hearing be postponed or continued.
7. Failure to abide by the above will result in the Hearing continuing in your absence.

Nature of alleged incapacity (include time, date and place):

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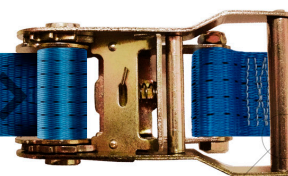
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tightening up the detail

Signatures

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Notice given by (Name)

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Designation

.....
Signature

.....
DD / MM / YYYY
Date

.....
Employee's signature

.....
DD / MM / YYYY
Date

Witness 1

Witness 2

