



Employee Warning Notice

Employee Information

Employee Name: _____ Date: _____
Employee ID: _____ Job Title: _____
Manager: _____ Department: _____

Type of Warning

First Warning Second Warning Final Notice

Type of Offense

Tardiness/Leaving Early Absenteeism Violation of Company Policies
 Substandard Work Violation of Safety Rules Rudness to Customers/Coworkers
 Other _____

Details

Description of Infraction: _____

Plan for Improvement: _____

Consequences of Further Infractions: _____

Acknowledge of Receipt of Warning

By signing this form, you confirm that you understand the information in this 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 this warning.

Employee Signature *Date*

Manager Signature *Date*

Witness Signature (if employee understands warning but refuses to sign) *Date*