This document contains nine sample letters. Click on any topic to link directly to that letter:

- Counseling Follow-Up
- Abandonment of Position (A copy of this letter should be attached with Form PBP-7: Notice of Separation & Going/Return from LWOP and sent to Human Resources for inclusion in the individual's personnel file)
- Probationary Termination
- Research Grant Position Dismissal
- Written Reprimand (two-page letter)
- Final Written Reprimand (two-page letter)
- Suspension Pending the Outcome
- Warning Notice of Substandard Performance (three-page letter)
- Dismissal (two-page letter).

If you are considering use of any of these letters, please consult with the Division of Human Resources Office of Employee Relations at 803-777-7550.

Sample - Counseling Follow-Up

MEMORANDUM TO: **Employee Name & Title** FROM: Your Name & Title DATE: SUBJECT: Counseling Follow-Up This memo serves as a follow-up and memorializes my conversation with you on . During the meeting, I reviewed with you some problematic job performance concerns and/or behavioral characteristics in need of improvement with you. If there have been previous counseling sessions, list those dates. We previously spoke regarding these same or other issues on (Dates). Since that time, I have yet to note improvement in these areas and the following problems continue to exist: 1. (List and elaborate) 2. If this is the initial attention getter for substandard performance, you may state. You are not meeting performance requirements in the Job Duties and/or Performance Characteristics" listed below: 1. (Give examples in each area) 2. Your position is very important and central to our office operations. (Now state what the employee needs to do to get on track – suggestions for improvement) Your failure to improve in the above referenced areas may warrant further action up to dismissal. (The following can be added if this is a probationary employee) – As a probationary employee, you may be dismissed at any time for failing to demonstrate acceptable standards for permanent status.) I will continue to monitor and assess your progress in eliminating these deficiencies over the next **specify timeframe** to determine whether required improvements have been satisfactory. I plan to meet with you to share my assessment of your progress at that time and will decide the status of your position in this office. If you have any questions or concerns, please do not hesitate to discuss them with me. Received by: Date: **Employee Name** (Your signature only denotes that you have received a copy of this memo. It does not necessarily denote

C: Department Head

agreement with the content.)

Sample – Abandonment of Position

Delivery Confirmation Receipt Requested

Date	
•	oyee Name & Title e Address
Dear	:
	nave failed to call or report to work sinceDATE current absence has been charged as unauthorized leave without pay.
three mana	ersity policy provides that employees who voluntarily fail to report to work for consecutive workdays and fail to contact appropriate University agement during this time period will be considered to have voluntarily ned through abandonment of position. At this point, you have been charged days of unauthorized leave without pay.
authoreason I show my co	at you have missed in excess of three consecutive days of work without prization, we consider this a voluntary resignation from employment by on of your abandonment of position. If there is some compelling reason that all not take this action you must provide me with a written explanation for consideration by 5:00 p.m., (Note: Time allowed for response should be conable usually 7 calendar days from the date of the letter.)
Since	erely,
Your Title	Name
C:	Department Head Division of Human Resources File

Sample – Probationary Termination Letter

Date	
	oyee Name & Title rtment Name ous
	Subject: Notice of Termination
Dear_	
<u>Projec</u>	ave determined that it is in the best interest of the <u>Name of Department or</u> and the University of South Carolina to terminate your probationary byment. This termination is effective immediately.
which While	action is taken in accordance with University policy and state regulation, both of provide that probationary employment may be terminated with or without cause. no cause is required during the probationary period of employment, there are erns about your job performance that prompt us to make this decision.
One o	of these concerns is (Note: Provide
depai	rient information to substantiate the concern, how it has impacted the rtment or area, prior counseling or discussions you have had with the byee, their reaction or inaction to the expressed concern.)
depar emple (You emple	tient information to substantiate the concern, how it has impacted the rtment or area, prior counseling or discussions you have had with the
(You employed) As stayour proportion your	rient information to substantiate the concern, how it has impacted the rtment or area, prior counseling or discussions you have had with the oyee, their reaction or inaction to the expressed concern.) may want to add a paragraph about conversations you had with the oyee when they began their employment regarding performance
(You employed) As stayour proportion your	cient information to substantiate the concern, how it has impacted the retreet or area, prior counseling or discussions you have had with the oyee, their reaction or inaction to the expressed concern.) may want to add a paragraph about conversations you had with the oyee when they began their employment regarding performance ctations and the requirements of the job.) ated above, this termination is effective immediately. You are requested to collect personal belongings and turn over all University property, including but not limited are keys, computer, access card, University Purchasing card, etc. immediately. If ave any questions regarding this action, please let me know.
(You employed) As stayour proportion you have	cient information to substantiate the concern, how it has impacted the retreet or area, prior counseling or discussions you have had with the oyee, their reaction or inaction to the expressed concern.) may want to add a paragraph about conversations you had with the oyee when they began their employment regarding performance ctations and the requirements of the job.) ated above, this termination is effective immediately. You are requested to collect personal belongings and turn over all University property, including but not limited are keys, computer, access card, University Purchasing card, etc. immediately. If ave any questions regarding this action, please let me know.

Sample – Research Grant Position Dismissal

Date	
•	oyee Name & Title rtment Name ous
	Subject: Notice of Termination
Dear_	:
<u>Proje</u>	ave determined that it is in the best interest of the <u>Name of Department or</u> ct and the University of South Carolina to terminate your research grant byment. This termination is effective immediately.
emple emple While	action is taken in accordance with University policy, state regulation and your syment agreement signed on <u>Date</u> . They provide that your syment in a research grant position may be terminated with or without cause. It no cause is required for your termination, there are concerns about your job rmance that prompt us to make this decision.
depa	of these concerns is (Note: Provide cient information to substantiate the concern, how it has impacted the rtment or area, prior counseling or discussions you have had with the oyee, their reaction or inaction to the expressed.)
empl	may want to add a paragraph about conversations you had with the oyee when they began their employment regarding performance ctations and the requirements of the job.)
your to yo	ated above, this termination is effective immediately. You are requested to collect personal belongings and turn over all University property, including but not limited ur keys, computer, access card, University Purchasing card, etc. immediately. If lave any questions regarding this action, please let me know.
Since	erely,
Your Title	Name

Sample – Written Reprimand

MEMORANDUM

TO: Employee Name & Title

FROM: Your Name & Title

DATE:

SUBJECT: Written Reprimand

This notice of disciplinary action is being issued to you for (state the specific offense the employee is in violation of from HR 1.39, Disciplinary Action and Termination for Cause policy). This action is in accordance with Human Resources Policy HR 1.39, Disciplinary Action and Termination for Cause.

On several occasions we have had formal and informal discussions with you regarding your behavior here in the **Department Name** and we have not seen improvements in most of these areas. I am giving you this written reprimand to address my areas of concern.

State the specifics of the incidents that led you to come to your current position that this action is necessary. This should state the date, time, location, what actually happened, and the effect that action or lack of action has on the department or a given situation.

As your supervisor, I expect you to meet the requirements of your position on a daily basis, (state here what the employee needs to do to overcome the deficiency or behavior that has led to the issuance of this document.)

You can make a <u>suggested EAP referral</u>, if appropriate with the following language. The University offers assistance to employees experiencing difficulties at work and in their personal lives through the Employee Assistance Program (EAP) through LifeServices EAP. The EAP provides four free visits and appropriate referral, if required. The EAP may be of assistance to you in improving your conduct and performance at work. You may contact LifeServices EAP at 800-822-4847 to schedule an appointment.

If you feel it is necessary to make a <u>management referral to the EAP</u>, the following language should be used. Consult with Employee Relations to coordinate referral. We are making a management referral to the EAP. The attached referral form will be sent to LifeServices EAP. You are being asked to sign this document to authorize release of information to me regarding your

Employee Name Written Reprimand Date Page 2 of 2

participation in the program. You are to contact LifeServices EAP at 800-822-4847 to schedule an appointment.

Beginning immediately you must follow the guidelines set forth in this written reprimand. Any deviations from the directives in this memorandum and/or other violations of university policies may result in further disciplinary action up to dismissal.

Let me know if you have any questions. You may provide a written response to this written reprimand for inclusion in your human resources file.

Received by:		
Englava Nava	Date:	
Employee Name		
(Your signature only denotes that you have received a copy of this memo. It does not necessarily denote agreement with the content.)		

C: Department Head
Division of Human Resources File

Sample – Final Written Reprimand

MEMORANDUM

TO: Employee Name & Title

FROM: Your Name & Title

DATE:

SUBJECT: Final Written Reprimand

This final written reprimand for <u>(state violations from HR 1.39)</u> is being issued to you in lieu of a suspension without pay and in order to afford you a final opportunity to demonstrate that you can and will perform your duties acceptably and in accordance with directives from your supervisor.

This section should provide a summary of what has led up to the decision to issue this final written reprimand to the employee, for example, Since (you establish a timeframe from a starting date), you received an initial document outlining specific job duties and expected behaviors for your position. In addition, you have received numerous verbal counseling sessions and ____ written disciplinary actions related to the performance of your duties in the department. You have received the following notices and disciplinary actions:

- State the date and specifically what each counseling session or previous disciplinary action addressed and the desired outcome as stated in the action.
- •
- •
- _

This brings us to the present time where you have state again the reason for this final written reprimand and what incidents have happened most recently to result in your decision to issue this final notice. Be specific regarding what happened and how it impacted the office or was in violation of a previously addressed policy violation.

Rather than suspend or terminate you for these most recent incidents of ______, I have decided to give you one final opportunity to demonstrate that you can and will perform acceptably by correcting the deficiencies indicated in this memorandum and work within the guidelines and directives necessary to perform your duties. To meet the requirements of your position:

Employee Name
Final Written Reprimand
Date
Page 2 of 2

 State here what the employee needs to do to correct the deficiencies or behaviors that have been stated as the reason for issuing this final written reprimand.

Employee Name

(Your signature only denotes that you have received a copy of this memo. It does not necessarily denote agreement with the content.)

C: Department Head
Division of Human Resources File

Sample – Suspension Pending the Outcome

Indicate Method of Delivery:

By Hand In Person or Delivery Confirmation Receipt Requested.

Date

Name of Employee & Tile Address

Dear:

I am writing to inform you that you are being suspended without pay from the University of South Carolina effective immediately. The suspension is necessitated by actions you may have taken in violation of University Policy and/or state law, and will remain in effect until further notice.

This action is in accordance with Human Resources Policy HR 1.39, Disciplinary Action and Termination for Cause. Please be advised that dismissal from the University may result if it is determined that a violation of University rules and policies and/or state law has occurred.

You must turn in all University property, including but not limited to your office and building keys, ID card, University Purchasing cards, and other work related materials. Please contact me to make necessary arrangements to do so.

You are advised you may have certain rights under the enclosed Grievance Policy. If you have any questions regarding your grievance rights, please contact the Employee Relations Office, Division of Human Resources, at 777-7550.

Sincerely,

Your Name Title

Enclosure: University Grievance Policy

C: Vice President/Chancellor
Department Head
Division of Human Resources File

Sample – Warning Notice of Substandard Performance

MEMORANDUM

TO: Employee Name & Title

FROM: Your Name & Title

DATE:

SUBJECT: Warning Notice of Substandard Performance

This document serves as a written notice that your performance as (*Job title*) fails to meet the performance requirements of the position. The major areas of concern related to your performance are described below. **NOTE: In this first paragraph you can address prior verbal counseling sessions or prior memos or warnings you have given to the employee in an attempt to correct deficient performance.**

JOB DUTIES:

#1: (Indicate the applicable job duty as it appears on the EPMS Planning document)

Success Criteria: (type the success criteria as it appears on the Planning document)

Performance Deficiencies Requiring Corrective Action:

- 1. (Elaborate on what the employee has not done as it relates to the success criteria on the job duty performance that demonstrated a failure to meet acceptable standards, use specific examples which demonstrate this failure)
- 2. Repeat this same format in each applicable job duty which is not acceptable, use the actual job duty number as indicated on the EPMS planning document.

PERFORMANCE CHARACTERISTICS:

#1: (Indicate the applicable performance characteristic as it appears on the EPMS planning document)

State the definition of the performance characteristic.

Employee Name Warning Notice of Substandard Performance Date Page 2 of 3 Performance Deficiencies Requiring Corrective Action: 1. 2. **OBJECTIVES:** #1: (Indicate the applicable objective as it appears on the EPMS planning document) Success Criteria: (type the success criteria as it appears on the planning document Performance Deficiencies Requiring Corrective Action: 1. (Elaborate on what the employee has not done as it relates to the success criteria on the job duty, performance that demonstrated a failure to meet acceptable standards, use specific examples which demonstrate this failure) 2. SUGGESTED WAYS TO OVERCOME PERFORMANCE DEFICIENCIES 1. 2. Well-written success criteria will aid in completing this section. You should address the cited duties, performance characteristics and any objectives listed above in this section. I will meet with you on a regular basis to assess your progress and performance. You will be given up to (type in time frame to improve – minimum 30 calendar days up to maximum of 120 calendar days) to make the necessary improvements in your performance. If satisfactory improvement is not made, you will receive an overall EPMS rating of "Fails to Meet Performance Requirements". Receipt of this rating may result in your demotion, transfer or dismissal, which complies with University of South Carolina Human Resources Policy HR 1.36, Performance Appraisal Policy for Classified Employees. I sincerely hope that you will make every effort to improve your performance and fulfill your job responsibilities. If you have any questions regarding this document, or what is expected of you in your position, please let me know.

Received by:

Employee Signature

Date

Employee Name Warning Notice of Substandard Performance Date Page 3 of 3

(Your signature only denotes that you have received this document and does not necessarily indicate your agreement with this action)

C: Department Head
Division of Human Resources File

Suggestions, Comments and Notes:

- If employee refuses to sign the Warning Notice of Substandard Performance, so note and sign your initials. You may have your supervisor available if you believe the meeting will be problematic.
- 2. In conjunction with issuing this document, a supervisor may also make an EAP Job Performance Referral. This may serve as a supervisory tool in a further effort to correct problematic performance and work conduct. Doing a referral does not halt any substandard notice or discipline that has been or is being imposed.
- 3. A properly completed and signed EPMS planning stage document needs to be in place prior to issuing a Warning Notice of Substandard Performance. Prior to finalizing and issuing a Warning Notice of Substandard Performance, The Employee Relations Office representative should review all pages of the planning stage document.
- 4. A Warning Notice of Substandard Performance issued to an employee without a planning stage invalidates the process.
- 5. Failing to strictly adhere to the requirement of having regular meetings with the employee and providing written documentation of those meetings during the warning period to the employee and Human Resources will also invalidate the process.
- 6. Issuing a fails to meet performance requirements EPMS evaluation after the expiration of the Warning Notice of Substandard Performance will invalidate the process.

Sample - Dismissal

MEMORANDUM

TO: Employee Name & Title

FROM: Your Name & Title

DATE:

SUBJECT: Notice of Dismissal

This notice of dismissal is issued to you for **state the specific violation(s) that the employee committed**. This action is taken in accordance with Human Resources Policy HR 1.39, Disciplinary Action and Termination for Cause.

This section should provide a summary of what has led up to the decision to terminate the employee. You have received numerous verbal counseling sessions and _____ written disciplinary actions related to the policy violations that have occurred in the past. Since ___date_, the following notices and disciplinary actions have been received by you:

 State specifically what each counseling session or previous disciplinary addressed and the desired outcome as stated in the action.

•

State again the reason for the termination and what incidents have happened most recently to result in your decision to terminate. Be specific regarding what happened and how it impacted the office or was in violation of a previously addressed policy violation.

Based on your refusal to adhere to the directives outlined in the counseling sessions of (list dates), the written reprimands of (list dates) and the suspension of (list date), I have decided to terminate your employment with the **Department name**. Your termination is effective immediately. You are requested to collect your personal belongings and return all university property to include, but not limited to, your keys, computer, access card, University Purchasing card, etc. immediately.

You are hereby notified that you may have certain rights under the enclosed Grievance Policy. If you have any questions regarding your grievance rights, please contact the Employee Relations Office, Division of Human Resources, at 777-7550. You are afforded the opportunity to explain your conduct in writing

Employee Name Notice of Dismissal Date Page 2 of 2

and attach your explanation to this termination notice. Please advise if you have any questions.

Enclosure: University Grievance Policy

C: Vice President/Chancellor Department Head Division of Human Resources File