

WRITTEN WARNING
Confidential

Employee Name _____ Department _____

Date(s) of Deficiency _____ Hire Date ____ / ____ / ____

Details of Incident (Specifically what, where, when, and how employee's performance and behavior was unacceptable)

Describe Extenuating Circumstance, if any _____

Plan for Improvement _____

Previous Twelve-Month History of Deficiencies

Date	Deficiency	Disciplinary Action Taken
____ / ____ / ____	_____	_____
____ / ____ / ____	_____	_____
____ / ____ / ____	_____	_____

Further Action (for example, final written warning)

Supervisor Signature _____ Date ____ / ____ / ____

2nd Level Management _____ Date ____ / ____ / ____

3rd Level Management/HR Department _____ Date ____ / ____ / ____

Employee Comments _____

I have read and understand the nature of this deficiency and understand that if this persists, further disciplinary action, up to and including termination of my employment, may occur. I also understand that the imposition of disciplinary action, up to and including termination, is not preconditioned upon receipt of verbal or written notice of unacceptable conduct.

Employee Signature _____ Date ____ / ____ / ____