

Date: Verbal Warning 1st Written Warning 2nd Written Warning Written Warning Without Suspension
 Written Warning With Suspension Demotion Discharge

EMPLOYEE INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>	Employee ID Number: <input type="text"/>
Last Name	First Name	M.I.	
<input type="text"/>			<input type="text"/>
Department			Position

NATURE OF VIOLATION/PERFORMANCE ISSUE

Based on the seriousness of the offense indicated below, any of the following could result in immediate disciplinary action, up to and including disciplinary suspension and termination. Pursuant to Foundation policy, all discharges must be reviewed by the affected manager with the Foundation Human Resources Manager and approved by the Foundation Director of Business and Finance and Chief Financial Officer before being initiated.

- | | |
|---|---|
| <input type="checkbox"/> Refusing work assigned | <input type="checkbox"/> Insubordination to management |
| <input type="checkbox"/> Not following work schedule | <input type="checkbox"/> Insubordination to customers |
| <input type="checkbox"/> Violation of time card procedures | <input type="checkbox"/> Failure to assist customers |
| <input type="checkbox"/> Violation of lunch break periods | <input type="checkbox"/> Disregard of Foundation policies |
| <input type="checkbox"/> Excessive tardiness (3 times in 30 days) | <input type="checkbox"/> Misuse or abuse of Foundation property |
| <input type="checkbox"/> Excessive absenteeism | <input type="checkbox"/> Sleeping on the job |
| <input type="checkbox"/> Leaving work without approval | <input type="checkbox"/> Use of drugs on Foundation premise |
| <input type="checkbox"/> Not following safety procedures | <input type="checkbox"/> Use of alcohol on Foundation premise |
| <input type="checkbox"/> Theft of any kind | <input type="checkbox"/> Other |

DETAILS OF VIOLATION/PERFORMANCE ISSUE

Date: Time: Location:

People involved (include any witnesses, if applicable):

First and Last Name

Provide description of the violation / performance issue

PRIOR RECORD OF COUNSELINGS

Has the employee received any prior warning?

Briefly explain:

If the prior warning was for a different performance issue/incident, please explain:

Was the prior warning verbal or written? Verbal Written Both

Date(s) of prior counseling:

DESCRIPTION OF COUNSELING/GUIDANCE

Describe any guidance/direction provided in order to assist employee in understanding how to correct any performance issues. Please note any training that is being required to help correct/improve performance.

EMPLOYEE COMMENTS

SIGNATURES

Supervisor/Department Manager Date

Employee Date

Director of Human Resources and Payroll Date

Employee refused to sign

Witness Date