## **Disciplinary Action Form**



Employee name:	Manager r	name:	
Title: Work location:		tion:	
Department:			
TYPE OF VIOLATION			
Attendance	Weapons/prohibited substa the workplace	nces in Substance abuse	
Safety violation	Theft or damage of property	y Poor performance	
Workplace violence or threats	Time theft	Violation of handbook policy: ————————————————————————————————————	
Insubordination	Falsification of documents	Misconduct:	
Harassment/bullying	Use of profanity	Other:	
DESCRIPTION OF ISSUE			
Describe in detail the incident, behavior, or company policy violation. Include relevant people involved, locations, and dates. Explain how this behavior negatively affects the company or others.			
LIST OF SUPPORTING DOCUMENTATION			
List any supporting documents, such as timecards, emails, text messages, videos, handbook policies, and acknowledgements. Attach them to this form.			
Type: Description:		Date:	
Type: Description:		Date:	
Type: Description:		Date:	
DETAILS OF PRIOR CORRECTIVE ACTIONS			
List out the prior disciplinary actions taken, such as counseling, warnings, or suspension.			
1.		Date:	
2.		Date:	
3.		Date:	
4.		Date:	
5.		Date:	
DISCIPLINARY ACTION			
Counseling Suspension without pay. Date(s):			
Verbal warning	Demo	Demotion. Effective date:	
Written warning	Pay c	Pay cut. Effective date:	
Final warning	Old ra	ate: New rate:	
Termination. Effective date:	Othe	r:	

## **Disciplinary Action Form**



CORRECTIVE ACTION			
Detail the actions the employee must take to fix their conduct, including attainable objectives with timeframes. Provide resources to help the employee achieve these goals.			
Goals:			
Resources:			
NEXT STEPS			
List out consequences or further disciplinary action for unsatisfactory improvement.			
SIGNATURES			
By signing below, the employee and manager acknowledge that they reviewed this disciplinary action together. The employee understands that this will be placed in their personnel file and that continued misconduct will result in further disciplinary action, up to and including termination.			
Employee signature:	Date:		
Employee signature.	Date.		
Manager signature:	Date:		
Martine and all and a second an			
Witness signature:			
Witness signature: Witness print:	Date:		
	Date:		
Witness print:			
Witness print:	s. The employee was		
Witness print:  REFUSAL ACKNOWLEDGEMENT  By signing below, the employee acknowledges they received this warning but disagrees with its contents allowed to explain why they disagreed by writing their reasons on the back of this form. The manager also	s. The employee was		