## **EMPLOYEE DISCIPLINARY ACTION FORM**

Employee:	Date of Warning:		
Department:	Supervisor:	Supervisor:	
TYPE OF VIOLATION:	WARNING:		
☐ Attendance     ☐ Carelessness     ☐ Disobedience       ☐ Safety     ☐ Tardiness     ☐ Work Quality       ☐ Other	Violation Date: Violation Time: (a.m. / p.m.) Place Violation Occurred:		
EMF	PLOYEE STATEMENT		
w	ARNING DECISION		
Approved by:			
Name	Title Da	te	
List All Previous Warnings (when warned and by whom):  Previous Warning:  Date  1st Warning	and have received a copy of the s	I have read this "warning decision". I understand it and have received a copy of the same.	
Verbal Written Previous Warning: 2nd Warning	Employee Signature	Date	
Date Verbal Written		g Date	
Previous Warning: 3rd Warning  Date  Verbal  Written	COPY DISTRIBUT	COPY DISTRIBUTION	