|  |  |
| --- | --- |
| **Employee Information** | |
| **Employee Name:** | **Supervisor/Manager Name:** |
| **Employee ID:** | **Date of Write Up:** |

|  |  |  |
| --- | --- | --- |
| **Write Up Details** | | |
| **Violation** | **Warning** | |
| * **Attendance:** Failure to provide required notice for an absence or taking extended time off without approval. | **Date of Violation:** mm/dd/yyyy  **Time of Violation:** 00:00 | **Warnings Given For Attendance Violations:**   * One * Two * Three |

|  |
| --- |
| **Description of Attendance Violation(s)** |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Action To Be Taken** | | | | |
| * Warning | * Probation | * Suspension | * Dismissal | Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Plan For Improvement** |
|  |

|  |
| --- |
| **Additional Comments** |
|  |

**By signing this form, the employee confirms that they have received a write up notice for violating (company name)’s attendance policy. The employee understands that further attendance issues will lead to disciplinary action and may result in termination of their employment.**

**Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Manager/Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**