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

|  |  |  |
| --- | --- | --- |
| **Write Up Details** | | |
| **Violation(s)** | | **Warnings Given** |
| * Tardiness/ Absenteeism * No Call No Show * Insubordination * Inappropriate Conduct/ Behavior * Drug or Alcohol Use in The Workplace | * Misuse of Company Resources * Violation of Company Policy/ Procedures * Failure to Accurately Record Hours (Time Theft) * Theft of Company Property * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * One * Two * Three |

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| **Description of Violation(s)** |
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| --- | --- | --- | --- | --- |
| **Action To Be Taken** | | | | |
| * Warning | * Probation | * Suspension | * Dismissal | Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Plan For Improvement** |
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| **Additional Comments** |
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**By signing this form, the employee confirms that they have received a write up notice for violating one or more workplace policies.**

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

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