

EMPLOYEE WARNING NOTICE

Employee name: [Name]

Job title: [Title]

Department: [Department]

Supervisor: [Name]

Date of notice: [MM/DD/YYYY]

Type of warning: ☐ Verbal (documented) ☐ First written ☐ Final written

Category: ☐ Attendance ☐ Performance ☐ Conduct ☐ Policy violation ☐ Safety ☐ Other

DESCRIPTION OF THE ISSUE (DATES, FACTS, AND THE POLICY INVOLVED):

[]

PREVIOUS DISCUSSIONS OR WARNINGS (DATES):

[]

EXPECTED IMPROVEMENT AND DEADLINE:

[]

CONSEQUENCES IF THE ISSUE CONTINUES:

[]

EMPLOYEE COMMENTS:

[]

By signing, the employee acknowledges receiving this notice. Signing does not mean the employee agrees with it.

Employee signature / date: _____

Supervisor signature / date: _____

Witness signature / date (if refused): _____