

Employee Corrective Action Form

Employee Name: _____ **Date of Report:** _____

Job Title: _____ **Date of Occurrence:** _____

Correction Action Step:

- Written Warning
- Final Written Warning
- Termination of Employment

Reason for Action:

- Unsatisfactory Performance
- Violation of Policy
- Other: _____

Section 1 – Reason for Corrective Action

Section 2 – Action Necessary to Avoid Further Corrective Action

Section 3 – Supervisor's Support

Section 4 – Consequences

Should the violation of policy or unsatisfactory performance continue, you may be subject to further corrective action up to and including termination.

Employee Remarks:

My signature below acknowledges receipt of this corrective action. I understand that an additional infraction may result in further corrective action up to and including termination of employment.

Employee Signature: _____ Date: _____

Manager / Supervisor: _____ Date: _____

Executive Director / Designee: _____ Date: _____

Employee Refused to Sign

Witness Signature: _____ Date: _____