

Before printing, edit the sections that appear in light blue and in brackets below.
Feel free to edit this form to match your organization's branded fonts and colors.



Workforce Solutions

Disciplinary Action Notice

Date Form Completed:

Name and Title of Employee:

Name and Title of Person Completing this Form:

Employer Statement of Incident

[Describe the incident, including dates and times of when it occurred and whether it was a violation of policy, unsatisfactory performance, or something else. Include names of all involved parties.]

Prior Warning(s) Related to this Incident

[List dates of warnings given to the employee in the past related to this incident, and note whether each warning was verbal or written.]

Company Policy Related to this Incident

[Insert relevant company policy.]

Summary of Performance Expectations

[Describe specific requirements that the company expects of the employee in order to improve performance to an acceptable level.]

Consequences of Failure to Improve Performance or Correct Behavior

[Sample language: I will assist you in any reasonable way to meet the Company's requirements. However, a failure to bring performance up to an acceptable level and/or additional policy violations may result in further disciplinary action up to and including termination of employment.]

Employee Statement and Acknowledgement

By signing below, I acknowledge I have been given time to review this form completely. I have also had an opportunity to attach a written statement confirming the report or providing additional details.

Employee Signature:

Date:

Manager or HR Signature:

Date:

Legal Disclaimer: This document is intended for informational purposes only and was created in accordance with federal law; it may not encompass state or local law.