



Employee Warning Notice

Employee Name: _____

Date: _____

Employee ID: _____

Job Title: _____

Manager: _____

Department: _____

Type of Warning

- | | |
|--|----------------------|
| 1. Verbal Warning by the Employee's Supervisor | 2. Letter of Counsel |
| 3. Letter of Warning | 4. Suspension |
| | 5. Dismissal |

Reason for Warning

- | | | |
|-------------------------|-------------------------------|-------------------------------|
| Tardiness/Leaving Early | Absenteeism | Violation of Company Policies |
| Substandard Work | Rudeness to Clients/Coworkers | Violation of Safety Rules |
| Other: _____ | | |

Event Details

Description of Infraction:

Plan for Improvement:

Consequences of Further Infractions:

Acknowledgement of Receipt of Warning

By signing this form, you confirm that you understand the information in this warning. You also confirm that you and your manager have discussed the warning and a plan for improvement. Signing this form does not necessarily indicate that you agree with this warning.

Employee: _____ Manager: _____ Date: _____