

Employee Disciplinary Form

Moorhead Campus

Greenville Center

Greenwood Center

Indianola Center

Employee Information

Employee Name _____

Date _____

Employee ID No. _____

Department _____

Job Title _____

Supervisor's Name _____

Level of Offense

First Warning

Second Warning

Final Warning

Type of Offense

Absenteeism

Insubordination

Rudeness to Customers/Coworkers

Tardiness/Leaving Early

Violation of Company Policies

Violation of Safety Rules

Other (specify) _____

Details

Description of Infraction:

Plan for Improvement:

Consequences of Further Infractions:

Acknowledgement of Receipt

By signing this form below, you confirm that you understand the disciplinary action noted above. You also confirm that you and your immediate supervisor have discussed the matter and a plan for improvement. Signing this form does not necessarily indicate that you agree with the disciplinary action.

Employee Signature

Date

Supervisor Signature

Date

Witness Signature

Date

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