

DOCUMENTATION OF VERBAL DISCIPLINARY ACTION

Employee Name _____
Employee Number _____
Department _____

_____ 1st Verbal Warning
_____ 2nd Verbal Warning

Date _____

Incident

Corrective Action

Employee's Signature **Date**

Indicates that the employee met with his/her immediate Supervisor, discussed this warning, and received a copy of the warning

Supervisor's Signature **Date**

Department Head's Signature **Date**