

Employee Warning Notice

Employee Information				
Employee Name: Date:			Date:	
Employee ID:		Job Title:	Job Title:	
Managei	r:		Department:	
Type of Warning				
	First Warning	Second Warning		Final Warning
Type of Offense				
	Tardiness/Leaving Early	Absenteeism	D	Violation of Company Policies
	Substandard Work	☐ Violation of Safety I	Rules 📙	Rudeness to Customers/Coworkers
Ш	Other:			
Details				
Description of Infraction:				
Plan for Improvement:				
That is improvement.				
Consequences of Further Infractions:				
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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.				
-	<u>-</u>			
Employee Signature				Date
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Manager Signature				Date
Witness Signature (if employee understands warning but refuses to sign)				Date