

# 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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