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**Employee Corrective Action Form**

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| ​**Employee Name:** | **Job Title:** |
| ​**Department:** | **Supervisor:** |
| **​Date:** |  |

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| **Type of Action:** \_\_  **Verbal Counseling** \_\_ **Written Warning** \_\_  **Discharge** \_\_  **Suspension** \_\_  **Final Warning** |

The purpose of this notice is to bring to your attention new or ongoing deficiencies in your conduct and/or performance. The intent is to define for you the seriousness of the situation so that you may take immediate corrective action. This report will be placed in your personnel file.

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| **Reason for action:** Describe the specific performance problem or incident; include dates where applicable.  |
| **Corrective Action Required:** Describe corrective action the employee must take to correct the problem; include timeframe for improvement, if appropriate. |

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| **If performance does not improve, the next step will be:**\_\_ **Written Warning** \_\_  **Final Warning** \_\_  **Discharge** |
| **Employee comments:** |

The above has been discussed with me by my supervisor. I understand the contents and acknowledge and understand the corrective action required. I also acknowledge and understand the potential consequences of noncompliance.

**Signatures:**

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| Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_ |
|  |  |
| Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_ |
|  |  |
| Dept. Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_ |

*Please provide a copy of this form to Human Resources once completed.*