



Corrective Action Form

Type of Warning: Verbal 1st Written Warning 2nd Written Warning Final Written Warning

Employee Name _____ Date of Notice _____

Employee Number _____ Date of Hire _____

Type of Violation

- | | | |
|---|---|--|
| <input type="checkbox"/> Attendance/Tardy | <input type="checkbox"/> Destruction or Misuse of County Property | <input type="checkbox"/> Theft |
| <input type="checkbox"/> Unsatisfactory Performance | <input type="checkbox"/> Violation of Employee Handbook | <input type="checkbox"/> Harassment |
| <input type="checkbox"/> Insubordination | <input type="checkbox"/> Violation of Drug Free Workplace | <input type="checkbox"/> Work Place Violence |
| <input type="checkbox"/> Dishonesty | <input type="checkbox"/> Falsifying any County Document | <input type="checkbox"/> Unsafe work Habit |
| <input type="checkbox"/> Other (please explain) _____ | | |

Description of Violation (attach any and all supporting documentation referenced)

Date of Incident _____ Time of Incident _____

Place of Incident _____

Description in Detail (What and How)

Witness ('s) to incident: _____

Prior Warnings

Has the employee had prior warning(s)? _____ If so, what was (were) the date(s)? _____

Employee Statement

Employee's reason for violation

Action to be Taken

Counseling Probation Suspension Demotion Termination

Future incidents may lead to more strict disciplinary action up to and including discharge.

I have read and understand this Corrective Action form.

Print Name of Employee _____ Employee Signature _____ Date _____

Print Name of EO/Director _____ Signature of EO/Director _____ Date _____

Print Name of Witness _____ Signature of Witness _____ Date _____