## **Corrective Action Form**

Employee Name			Date	
Supervisor Name			Dept	
Type of Action				
Verbal	Writte	en	Final	
Type of Infraction				
Excessive absenteeism		Excessive tardy/early quit		
Failure to follow instructions		Violation of company policy/procedure		
Rudeness to co-worker/Customer		Failure to protect company assets		
Unsatisfactory work quality		Working on personal matters		
Actions resulting in customer dissatisfaction		Other		
Supervisor Statement				
Date of Incident	Supervisor Description	1		
Plan for Improvement				
Improvement expected by				
-	-	-	o to and including termination. any further infractions of any kind	•
I have read and understand this				
	Em	Employee Signature		