Store #	
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Employee's

## EMPLOYEE INCIDENT TRACKING FORM

Employee Name:			
1 3	(First)	(Last)	
Employee Number	er:		_
Can be used for listing	verbal corrections and tr	acking tardiness, excused al	bsences, minor dress code violations,
etc.			
♦ This form cannot be	e used as a substitute for	Counseling Statement	
♦ Employees late by a	an hour or more require	an Attendance Counseling F	<sup>2</sup> orm
♦ Unexcused absence	s also require an Attenda	ance Counseling Form	
♦ The employee must	initial each recorded inc	cident <i>unless</i> they have alrea	ady signed a counseling statement

Date Manager's MM/DD/YYYY Last Name		Description of incident or violation	Employee's Initials
	1		

regarding this incident.

Manager's