



FURUKAWA AUTOMOTIVE SYSTEMS LIMA PHILS. INC.

Lima Technology Center, Lipa City, Batangas

INCIDENT REPORT FORM

ID Number: 15-02490	Complete Name: Castillo, Paula Bianca	Section: Production 5	Date of Incident: July 09, 2019	Date Issued: July 31, 2019
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Part 1: (To be filled-in by the Immediate Superior)

INCIDENT REPORT

VIOLATION:

On July 09, 2019, it was reported that you allegedly caught removing of clamp using band tail at Shiage Process as reported by QA staff Marissa Valencia.

In the view above, please explain in writing within 5 days why no disciplinary action should be imposed on you for violating the Company Policy for Penalty for Major Non-compliance which states that penalty shall be given to member who will caught and/ or proven to conduct unauthorized repair / Hidden repair excluding usage of prohibited extraction tool.

The allege offense is punishable by Suspension. Your failure to submit the written explanation as required shall be treated as your waiver of right to be heard and we shall proceed processing the case.

FREQUENCY OF OFFENSE

<input checked="" type="checkbox"/> 1st Offense	<input type="checkbox"/> 2nd Offense	<input type="checkbox"/> 3rd Offense	<input type="checkbox"/> 4th Offense	<input type="checkbox"/> 5th Offense
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Issued by: Zylene Perez	Noted by: Jerald Canadilla	Received by Employee: PAULA BIANCA CASTILLO	Date Received: 8-8-19
Immediate Superior Signature over Printed Name	Manager Signature over Printed Name	Signature over Printed Name	

Part 2: (To be filled-in by concerned employee)

EXPLANATION

Nag zcho bandcut po ang clamp TB-8-B kaya po ang pinalitan ko sa shiage process; isang clamp tail po yung hinangal ko, nanghinayang lang po ako sa output.

Hindi na po ako gagawa ng abnormality at susunod na ako sa tamang proses.

PAULA BIANCA CASTILLO

Employee Name
Signature over Printed Name

Date prepared:

8-8-19

Explanation received by:
Signature over Printed Name

Date Received:

8/9/19

Part 3: (To be filled-in Immediate Superior)

EVALUATION / INVESTIGATION

Minor Offense	<input type="checkbox"/> Verbal Warning <input type="checkbox"/> Written Warning	Major Offense	<input checked="" type="checkbox"/> Suspension <input type="checkbox"/> Dismissal
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Result of Investigation:

- problem occur in the early process of inspection (shrage), no need "manghinayang sa output"

RECOMMENDATION / CORRECTIVE ACTION

Suspension	3 Workings Days	Date from <u>9/10</u> to <u>9/12</u>	Date Returned to work <u>9/13</u>
Dismissal	Effective Date: _____	Offenses Against: _____	
Remarks:			
Issued by: <u>[Signature]</u>	Recommended by: <u>[Signature]</u>	Approved by: <u>[Signature]</u>	Noted By: <u>[Signature]</u>
Immediate Superior (Signature over Printed Name)	Section/ Department Manager (Signature over Printed Name)	Human Resources (Signature over Printed Name)	President (Signature over Printed Name)
Date: _____	Date: _____	Date: _____	Date: _____

Note: For recommendation of the imposition of lesser penalty of verbal / written warning, aside from the signature of the immediate superior & Manager, the approval of Human Resource is needed before implementing the Disciplinary Action.
In case/s of SUSPENSION and/or TERMINATION, the President's signature must affix before implementing the Disciplinary Action.

By signing this notice, I am acknowledging that I have read and understood the information in this IR Form and I have been Informed of the consequences of my action.

PAULA B. CASTILLO
Employee Signature over Printed Name:
Date Received: 6-8-17