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|  | | | | | | | | | | | | | | | | | | | |
| **EMPLOYEE WARNING NOTICE** | | | | | | | | | | | | | | | | | | | |
| EMPLOYEE INFORMATION | | | | | | | | | | | | | | | | | | | |
| Employee Name: | | | | | *hr\_employee\_name* | | | | | | | | Date: | | | *hr\_date* | | | |
| Employee ID: | | | | | *hr\_employee\_id* | | | | | | | | Job Title: | | | *hr\_job\_title* | | | |
| Manager: | | | | | *hr\_manager* | | | | | | | | Department: | | | *hr\_department* | | | |
|  | | | | | | | | | | | | | | | | | | | |
| MISCONDUCT CATEGORY | | | | | | | | | | | | | | | | | | | |
| **Hr\_mc\_a** | A | | Work Performance and Productivity | | | | | | | | **Hr\_mc\_d** | D | | Protection and Property | | | | | |
| **Hr\_mc\_b** | B | | Attendance | | | | | | | | **Hr\_mc\_e** | E | | Health, Safety and Physical Security | | | | | |
| **Hr\_mc\_c** | C | | Professional Conduct | | | | | | | | | | | | | | | | |
| ABSENCE IDENTIFIED AS | | | | | | | | | | | | | | | | | | | |
| MISCONDUCT LEVEL | | | | | | | | | | | | | | | | | | | |
| **Hr\_ml\_a** | Minor A | | | | | **Hr\_ml\_b** | Minor B | | | | | **Hr\_ml\_s** | Serious | | | | **Hr\_ml\_g** | Grave | |
| SANCTIONS | | | | | | | | | | | | | | | | | | | |
| **hr\_occ\_num** | | | | hr\_occ\_misconduct | | | | | | | | | | | | | | | |
| PROGRESSION OF SANCTION | | | | | | | | | | | | | | | | | | | |
| **Hr\_ps\_d** | Documented Verbal Coaching | | | | | | | | | | | **Hr\_ps\_w** | Written Reprimand | | | | | | |
| **Hr\_ps\_f** | Final Written Reprimand | | | | | | | **Hr\_ps\_s** | Suspension | | | | | | **Hr\_ps\_t** | | Termination | | |
| INFRACTION DETAILS | | | | | | | | | | | | | | | | | | | |
| Date | | hr\_infraction\_date | | | | | | | | Place | | | hr\_infraction\_place | | | | | | |
| MANNER OF COMMISSION | | | | | | | | | | | | | | | | | | | |
| hr\_commision\_manner | | | | | | | | | | | | | | | | | | | |
| SPECIFIC VIOLATED GUIDELINE(S)/POLICY | | | | | | | | | | | | | | | | | | | |
| **B. Attendance**  hr\_violation\_details | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| hr\_mb | | | | | | | | | | | | | | | | | | | |
| PLAN FOR IMPROVEMENT | | | | | | | | | | | | | | | | | | | |
| hr\_improvement\_plan | | | | | | | | | | | | | | | | | | | |
| CONSEQUENCES OF FURTHER INFRACTION(S): | | | | | | | | | | | | | | | | | | | |
| **hr\_further\_infractions** | | | | | | | | | | | | | | | | | | | |
| ACKNOWLEDGEMENT RECEIPT OF WARNINGS | | | | | | | | | | | | | | | | | | | |
| By signing this form, you confirm that you understand the information in this warning. You also confirm that you and your manager have discussed the warning and a plan for improvement. | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |  |
| Employee signature over printed name | | | | | | | | | | | | | | | | | | | Date Signed |
|  | | | | | | | | | | | | | | | | | | |  |
| Department Head signature over printed name | | | | | | | | | | | | | | | | | | | Date Signed |
|  | | | | | | | | | | | | | | | | | | |  |
| Witness signature over printed name (if employee refuses to sign) | | | | | | | | | | | | | | | | | | | Date Signed |