****Coaching Action Form (rev 12/14)

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| **Employee Name :** | **Date:** | **Location:** |
| **Job Title:** | **Supervisor’s Name:** | |

**Problem or Code of Conduct Violation:** *what Policy/Procedure was violated ?*

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| --- | --- | --- |
| [ ] Violation of Nonnegotiable Policy | [ ] Safety/Security | [ ] No call / No Show |
| [ ] Tardiness/Absenteeism | [ ] Falsification of Records | [ ] Theft or Removal of Property |
| [ ] Inappropriate Behavior | [ ] Cash Violation | [ ] Drugs/Alcohol |
| [ ] Uniform/Grooming Standards | [ ] Insubordination | [ ] Other |

**Type of Notice:** *Progressive Discipline Process or Gross Violation ?*

|  |  |
| --- | --- |
| [ ] Coaching | [ ] Termination |
| [ ] Written | [ ] Resignation |
| [ ] Final | [ ] Other / Follow Up |
| **Previous Corrective Action**: *was employee counseled before?* | |
| [ ] NO | |
| [ ] YES, if so, when? | [ ] Verbal : |
| [ ] Written : |

**Nature of Termination:** *if appropriate.*

|  |  |  |
| --- | --- | --- |
| [ ] Voluntary | [ ] Involuntary | Effective: |

**Factors or Events:** *Identify behaviors, performance, or events requiring corrective action.*

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| *On…. This situation occurred…….. The details are………. This is a violation of the following policy…..* |

**Improvement Required:** *SMART Goals and Time Allowed (specifically what must be done to improve and by when)*

|  |  |  |
| --- | --- | --- |
| ***Goal***   1. *Issue with corrective action/training…..* | ***Due Date***  *Month/day* | ***Follow up***  *Month/day* |

**Consequences of Failure to Improve:**

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| --- |
| *Future violations of this policy, other policies, or not meeting performance standards, may result in further disciplinary action up to and including termination. If at any time during this time frame you determine that this plan is not aligned with your personal or professional interests, please let me know so that we can discuss the discontinuance of this plan and the appropriate next steps. Likewise, Prime reserves the right to discontinue the plan and pursue other alternatives in the event that substantial progress is not being made or you fail to fulfill the other core accountabilities of your current position.* |

**Employee Comments:[ ] I AGREE with the employer’s statement [ ]I DISAGREE with the employer’s statement**

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**The above has been discussed with me by my manager and I understand that a copy of this document will be placed in my employee file**

|  |  |
| --- | --- |
| **Employee Signature/Date** | **Manager Signature /Date** |