



**Disciplinary Action Form**

<b>Employer:</b> _____	<b>Date:</b> _____
<b>Employee Name:</b> _____	<b>SS#:</b> _____

<b>Discipline Taken</b>	<b>Prior Dates of Discipline</b>
<input type="checkbox"/> Verbal Warning <input type="checkbox"/> 1st Written Warning <input type="checkbox"/> 2nd Written Warning <input type="checkbox"/> Suspension Pending Discharge	_____ Verbal Warning _____ 1st Written Warning _____ 2nd Written Warning _____ Suspension Pending Discharge

**Occurrences Resulting in Present Discipline**

---



---



---



---

**Action Plan to Prevent Reoccurrences**

---



---



---



---

<b>Employee* Signature:</b> _____	<b>Date:</b> _____
<b>Supervisor Signature:</b> _____	<b>Date:</b> _____
<b>Witness Signature :</b> _____	<b>Date:</b> _____

\*If the employee refuses to sign this document, Manager needs to write on the above line that the Employee refused to sign. Also, make a copy for the disciplined Employee that includes signatures.