

# Employee Write-Up Forms Packet

## Table of Contents

- Employee Complaint Form – Page 2
- Employee Counseling Form – Page 4
- Employee Disciplinary Action Form – Page 5
- Employee Reprimand Form – Page 7
- Employee Termination Letter – Page 8
- Employee Warning Notice – Page 9

# Employee Complaint Form

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Status:  Employee  Customer  
 Faculty  Other (Specify) \_\_\_\_\_

Department: \_\_\_\_\_

Address: \_\_\_\_\_

## Complaint Information

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Please describe the incident in detail:

---

---

---

---

---

---

---

---

If there are others who have witnessed the incident, please provide their names and phone numbers below:

---

---

---

Is this the first time you have raised this concern about this person?

\_\_\_\_ Yes \_\_\_\_ No

Do you have any suggestions for resolving the complaint? If so, please explain.

---

---

---

Do you have any additional information or complaints? If so, please explain.

---

---

---

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

# Employee Counseling Form

Counseling Date: \_\_\_\_\_

Employee's Full Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Worksite Employer: \_\_\_\_\_ Location: \_\_\_\_\_

**This Counseling is being issued because of the following (Select all that apply):**

- Attendance       Behavior/Teamwork       Inappropriate Conduct
- Inappropriate Dress       Safety Violation       Sleeping on the Job
- Substandard Work       Violence       Other \_\_\_\_\_

Incident Date: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

**Describe the nature of the incident (If applicable):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of Witness(es):**

\_\_\_\_\_

**Corrective Action:**

\_\_\_\_\_  
\_\_\_\_\_

**Employee Comments:**

\_\_\_\_\_  
\_\_\_\_\_

This form is intended to help direct the employee onto a successful path in the work place. It is important to make immediate and sustained improvement and the failure to do so could result in further disciplinary action, up to and including termination of employment.

\_\_\_\_\_  
Employee's Signature      Print Name      Date

\_\_\_\_\_  
Supervisor's Signature      Print Name      Date

\_\_\_\_\_  
Witness's Signature      Print Name      Date



# EMPLOYEE DISCIPLINARY ACTION FORM

Employee: \_\_\_\_\_ Date of Warning: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_

---

## Type of Violation

- Attendance  - Carelessness  - Disobedience  - Safety  - Tardiness

- Work Quality  - Other (explain) \_\_\_\_\_

---

## Warning

Violation Date: \_\_\_\_\_ Violation Time: \_\_\_\_\_

Violation Location: \_\_\_\_\_

---

## Employer's Statement

---

---

---

---

---

## Employee's Statement

---

---

---

---

## The Decision

---

---

---

---

Decision Approved by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

---

## Previous Warnings

1<sup>st</sup> Warning - Date: \_\_\_\_\_ Type:  - Verbal  - Written

2<sup>nd</sup> Warning - Date: \_\_\_\_\_ Type:  - Verbal  - Written

3<sup>rd</sup> Warning - Date: \_\_\_\_\_ Type:  - Verbal  - Written

Other: \_\_\_\_\_

---

---

## Signatures

Employer's/Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

I have read this "warning decision". I understand it and have received a copy of the same.

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

# Employee Reprimand Form

Employee	Work Location	Date of Discipline Action Given
Employee ID # (if any)	Date of Occurrence	Issuing Supervisor

**Violation Statement**

Place of Violation: \_\_\_\_\_

Date of Violation: \_\_\_\_\_

Description of Violation:

---



---

**Disciplinary Action**

Administrative Leave w/Pay

Recommendation for Termination

Sent Home w/Pay

Suspension Without Pay \_\_\_ Days

None

Other \_\_\_\_\_

**Corrective Actions**

Description of Corrective Actions to be Taken:

---



---

I have read this Notice of Discipline and understand it.

Employee refused to sign this form and all attached documentation.

Employee's Signature	Print Name	Date
Supervisor's Signature	Print Name	Date
Witness's Signature	Print Name	Date

# Employee Termination Letter

Date: \_\_\_\_\_

Name of Terminated Employee: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Dear \_\_\_\_\_,

On \_\_\_\_\_ (Date), your employment with \_\_\_\_\_

will be officially terminated for the following reason:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I wish you the best in finding new employment.

**Signature** \_\_\_\_\_ **Print** \_\_\_\_\_



# Employee Warning Form

Employee's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Manager/Supervisor's Name: \_\_\_\_\_

If previous discipline meeting occurred, enter date: \_\_\_\_\_

## Reasons for Warning:

Absenteeism     Failure to follow procedure     Rudeness  
 Tardiness     Failure to meet performance     Refusal to work overtime  
 Policy violation     Fighting     Language  
 Other \_\_\_\_\_

## Details of actions that warranted this warning:

---

---

---

The following immediate and sustained corrective action must be taken by the employee.  
Failure to do so will result in further disciplinary action up to and including termination:

---

---

---

**Note:** Your signature on this form means that we have discussed the situation. It doesn't necessarily mean you agree that the infraction occurred.

\_\_\_\_\_  
Employee's Signature                      Print Name                      Date

\_\_\_\_\_  
Supervisor's Signature                      Print Name                      Date

