

EMPLOYEE DISCIPLINE FORM

Employee Name: _____ Employee ID: _____

Department: _____ Supervisor: _____

Incident Details:

Date and Time of Incident: _____

Location of Incident: _____

Description of Incident:

Policy Violated: _____

Disciplinary Action Taken:

☐ Verbal Warning

☐ Written Warning

☐ Suspension

☐ Probation

☐ Termination

☐ Other (Specify): _____

Details of Disciplinary Action:

Employee Response (Optional):

Witnesses:

Name: _____

Statement:

Signatures:

Employee Signature

Supervisor Signature

Signature: _____

Signature: _____

This form documents disciplinary action taken against the employee named above. The employee acknowledges receipt and understanding of the details documented herein. This form is maintained in the employee's personnel file. The disciplinary action taken is consistent with company policy and applicable United States employment laws.

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<https://formtemplate-us.com/employee-discipline-form/>

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