CORRECTIVE ACTION FORM

Employee:	Date of Notice:
Supervisor:	Position:

Type of Corrective Action: ☐ Coaching ☐ Written Warning ☐ Final Warning ☐ Termination

1. Details of Occurrence *(Provide specific details: Include dates, location, facts, and rule or policy violated)*

_____
_____
_____
_____
_____

2. Corrective Action Required *(Describe the improvement expected and timeline)*

_____
_____
_____
_____
_____

3. Consequences for failure to correct

Failure to improve may result in further disciplinary action, up to and including termination.
You are being formally warned to bring to your attention the severity of this matter, and this serves as a written warning. Failure to correct this behavior and/or further violation of company policy will result in further disciplinary action, up to and including termination of employment.

Employee Statement

_____
_____
_____
_____
_____

Manager Signature:	Date:
Employee Signature:	Date:

By signing this notice, I am acknowledging that I have been counseled about my inappropriate conduct and informed of consequences if improvements are not made

(Distribution: Original to employee's file, Copy to employee, Copy to Integrity)