

Department of Finance and Administration Human Resources

**Notice of Disciplinary Action Form**

R 3/11/24

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| *Name of Employee (Last, First, MI)*Click or tap here to enter text. | *Date*Click or tap to enter a date. |
| *Office Name*Click or tap here to enter text. |
| *Personnel Number*Click or tap here to enter text. | *Business Area*Click or tap here to enter text. | *Personnel Area*Click or tap here to enter text. |
| *Name of Supervisor/Manager*Click or tap here to enter text. | *Phone number*Click or tap here to enter text. |
| *Title of Violated Policy/Employee Handbook Section*Click or tap here to enter text. |
| *Action Taken* [ ]  Verbal Warning [ ] Written Warning [ ]  Suspension [ ] Termination |

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| *Reason for Disciplinary Action*Click or tap here to enter text. |
| *Details of Misconduct*Click or tap here to enter text. |
| *Date(s) of Incident(s)*Click or tap here to enter text. |
| *Consequence(s) for the next Incident* Additional disciplinary actions may be applied up to and including termination. Termination has no further disciplinary consequences. |

**My signature below acknowledges receipt of this Disciplinary Action and does not indicate that I agree with this action.**

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| *Employee's Signature*  | *Date* |
| *Supervisor's Signature*  | *Date* |