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| Employee Name:  |
| ⬜ First Warning ⬜ Second Warning⬜ Final Warning  | Date of Occurrence: / / Is this a repeated offense? ⬜ Yes ⬜ No  |
| **Reason for Warning:**⬜ Insubordination ⬜ Violation of or failure to observe policies and procedures⬜ Tardiness, absenteeism, failure to report to work, failure to complete scheduled shift⬜ Refusal to work overtime or stay late or participate in team meetings/trainings⬜ Under the influence of and/or possession of drugs or alcohol ⬜ Dishonesty or theft or unauthorized removal of property⬜ Failure to observe proper safety procedures including failure to keep children safe⬜ Discourtesy or verbal abuse of guest, parent, child or employee⬜ Damage or misuse of childcare property⬜ Physical or verbal assault and/or fighting ⬜ Falsification of documentation⬜ Harassment ⬜ Failure to meet performance standards or complete work on time⬜ Cell phone use⬜ Other**Remarks. Explain reasons for warning or discipline, including specific details of incident or violation; include prior warning(s):** |

**CORRECTIVE ACTION & SIGNATURE**

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| **Disciplinary Action**⬜ Oral Reprimand ⬜ Written Reprimand ⬜ Sent Home without Pay ⬜ Suspension without pay \_\_\_\_days ⬜ Administrative Leave without pay ⬜ Recommend Termination |
| **Corrective Action to be Taken (include timeframe for improvement)** |
| Employee Signature:***Note:*** *Your signature on this form means that we have discussed the situation. It doesn’t necessarily mean you agree that the infraction occurred.* | Date: |
| Manager’s Signature: | Date:  |