

# DISCIPLINARY STATEMENT

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Date of incident or occurrence: \_\_\_\_\_

**Action(s) taken (check all that apply):**

\_\_\_\_ Coaching      \_\_\_\_ Verbal Warning      \_\_\_\_ Written Warning  
\_\_\_\_ Termination      \_\_\_\_ Other: \_\_\_\_\_

**Description of incident, issue, or occurrence:**

\_\_\_\_ Absence/Tardiness      \_\_\_\_ Safety Violation      \_\_\_\_ Conduct  
\_\_\_\_ Policy Violation      \_\_\_\_ Performance Issue      \_\_\_\_ Other: \_\_\_\_\_

**Explanation of incident, issue, occurrence, or policy violation:**

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

**Corrective action plan:**

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

**Disciplinary action if not corrected:**

\_\_\_\_ Written Warning      \_\_\_\_ Final Warning      \_\_\_\_ Termination  
\_\_\_\_ Other: \_\_\_\_\_

**Employee Comments:**

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

**By signing below, you acknowledge that you have received this disciplinary statement:**

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

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

HR/ Witness (optional): \_\_\_\_\_ Date: \_\_\_\_\_