Employee’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

A Verbal warning has taken place regarding the following (check all that apply and provide details under summary):

|  |  |
| --- | --- |
| Tardiness | Violation of safety rules |
| Leaving work without authorization | Insubordination |
| Absence | Unauthorized or inappropriate use of  Library equipment, resources, or materials |
| Unacceptable personal behavior | Other violation of policy and/or procedure    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Failure to follow instructions |  |
| Poor job performance |  |
| Dishonesty |  |

Summary of violation:

Summary of Corrective Plan of Action:

Follow up date(s):

Please sign below. Your signature on this document is an acknowledgment that this matter has been discussed with you, you have reviewed this document prior to inclusion in your personnel file, and you understand the corrective action required. Your signature is not an indication of agreement or disagreement of the deficiencies that are outlined in this document.

This document will be placed in your personnel file. Failure to comply with these expectations will result in further disciplinary procedures up to and including termination of employment.

Employee’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee comments: