[Company Name]



# **Employee Warning Report**

## Employee information

|  |  |  |  |
| --- | --- | --- | --- |
| Employee name |  | Date | [Date] |
| Employee ID |  | Job Title |  |
| Manager |  | Department |  |
| Type of Warning | Choose an item.[Optional comment] | Type of Offense | Choose an item.[Optional comment] |

## Description of Infraction

[Description of Infraction]

## Plan for Improvement

[Plan for Improvement]

## Consequences of Further Infractions

[Consequences of Further Infractions]

## Acknowledgement of Receipt of Warning

By signing this form, you confirm that you understand the information in this warning. You also confirm that you and your manager have discussed the warning and a plan for improvement. Signing this form does not necessarily indicate that you agree with this warning.

|  |  |
| --- | --- |
|  |  |
| Employee Signature | Date |
|  |  |
| Manager Signature | Date |
|  |  |
| Witness Signature (if employee understands warning but refuses to sign) | Date |