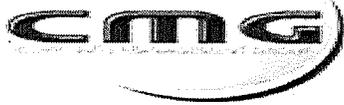




### Disciplinary Report Form

<b>Employee Name:</b> Fatuma Adan	<b>Hire Date:</b> 5/10/2018	<b>Job Title:</b> Production
<b>Department:</b> Production	<b>Shift:</b> 2 <sup>nd</sup>	<b>Supervisor:</b> Jonny Soth
<b>Offense Track:</b> <input checked="" type="checkbox"/> Performance Issue <input type="checkbox"/> Work rule violation, <b>Work rule violated, if any:</b>		
<b>Type of Offense:</b> <input checked="" type="checkbox"/> Absenteeism <input type="checkbox"/> Tardiness <input type="checkbox"/> Misuse of property/equipment <input type="checkbox"/> Using property/equipment for personal use <input type="checkbox"/> Leaking confidential information <input type="checkbox"/> Theft or fraud <input type="checkbox"/> Lying or cheating <input type="checkbox"/> Falsifying company documents <input type="checkbox"/> Unsafe behavior <input type="checkbox"/> Eating in undesignated areas <input type="checkbox"/> Smoking in undesignated areas <input type="checkbox"/> Posting items without permission <input type="checkbox"/> Spreading gossip <input type="checkbox"/> Using vulgar language <input type="checkbox"/> Horseplay <input type="checkbox"/> Indecent behavior <input type="checkbox"/> Bringing weapon onsite <input type="checkbox"/> Bringing illegal drugs/alcohol onsite <input type="checkbox"/> Failing to follow instructions <input type="checkbox"/> Poor work quality <input type="checkbox"/> Poor work quantity <input type="checkbox"/> Refusing to work <input type="checkbox"/> Sleeping on the job <input type="checkbox"/> Poor hygiene <input type="checkbox"/> Poor housekeeping <input type="checkbox"/> Disregarding dress code <input type="checkbox"/> Other <input type="checkbox"/> Disruption in the work place <input type="checkbox"/> Threatening or creating conflict w/ coworkers		
<b>Absenteeism</b>		
<b>Incident Description:</b> (Describe actions, behavior, or incident; date(s); time(s); place(s); witness(es) and his/her observations; impact(s) of actions, behavior, or incident; employee's responses immediately after the incident and other significant conversations; employee's previous related training or counseling; and other relevant facts.)  Unexcused Absence on 12/5/2019		
<b>Completed By:</b> <i>Diana Elton</i>	<b>Date:</b> 12/6/2019	
<b>Shaded area to be completed by Human Resources only.)</b>		
<b>Progressive Step:</b> <input type="checkbox"/> Oral warning* <input type="checkbox"/> Suspension (unpaid) <input checked="" type="checkbox"/> Written reprimand <input type="checkbox"/> Release <input type="checkbox"/> Suspension (paid) *File apart from personnel files and copies thereof	<b>Previous Warnings:</b> Type/Offence/Date  From 5/18/2018 to Date:  2 Notification of Attendance 2 Verbal of Attendance 1 Written of Attendance	
<b>Written Warning for the Attendance Policy</b>		
<b>Consequence if incident occurs again:</b> Possible Written Warning / Possible Final Warning		
<b>Human Resources Signature(s):</b> <i>Kelsey Sikkink</i>	<b>Date:</b> 12/6/2019	
<b>Employee Comments: (Attach sheets if necessary.)</b>  <b>Go Two (2) Months Without Calling In</b> If you have any questions, please contact CMG. (507) 923-4955  ** Copy Mailed on <u>12/6/2019</u> **		



# Disciplinary Report Form

<b>Employee name:</b> Fatuma Adan	<b>Hire Date:</b> 5/10/2018	<b>Job title:</b> Production
<b>Department:</b> Production	<b>Shift:</b> 2nd	<b>Supervisor:</b> Jonny Soth

**Offense track:**      Performance issue                      Work rule violation, **Work rule violated, if any:**

**Type of offense:**  Absenteeism  Tardiness  Misuse of property/equipment  Using property/equipment for personal use  Leaking confidential information  Theft or fraud  Lying or cheating  Falsifying company documents  Unsafe behavior  Eating in undesignated areas  Smoking in undesignated areas  Posting items without permission  Spreading gossip  Using vulgar language  Horseplay  Indecent behavior  Bringing weapon onsite  Bringing illegal drugs/alcohol onsite  Failing to follow instructions  Poor work quality  Poor work quantity  Refusing to work  Sleeping on the job  Poor hygiene  Poor housekeeping  Disregarding dress code  Other  Disruption in the work place  Threatening or creating conflict w/ coworkers

## Tardiness

**Incident description:** (Describe actions, behavior, or incident; date(s); time(s); place(s); witness(es) and his/her observations; impact(s) of actions, behavior, or incident; employee's responses immediately after the incident and other significant conversations; employee's previous related training or counseling; and other relevant facts.)

## Unexcused Tardy on 9/26/2019

<b>Completed by:</b> Diana Elton	<b>Date:</b> 9/27/2019
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**(Shaded area to be completed by Human Resources only.)**

<b>Progressive step:</b> <input type="checkbox"/> Oral warning* <input type="checkbox"/> Suspension (unpaid) <input checked="" type="checkbox"/> Written reprimand <input type="checkbox"/> Release <input type="checkbox"/> Suspension (paid) *File apart from personnel files and copies thereof	<b>Previous warnings:</b> Type: Offense: Date: Type: Offense: Date:  January 2019 to Date:  2 Notification for tardiness 2 Verbal for tardiness 1 written for tardiness
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## Written Warning for Tardiness Policy

**Consequence if incident occurs again:**  
**Possible Written Warning / Possible Final Warning**

<b>Human Resources Signature(s):</b> Kelsey Sikkink	<b>Date:</b> 9/27/2019
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**Employee statement:**  I agree with the incident description above.  I disagree with the incident description above.  
**Date report presented to employee:**

**Employee comments:** (Attach sheets if necessary.)

**Go 2 months without calling in  
\*\*Please sign and return to CMG\*\***

**Employee acknowledgement:** My signature acknowledges that I have received this report and that it has been discussed with me. I understand that my signature is not an admission of the incident or offense. I understand that I may appeal this report by filing a Discipline Complaint Form.

<b>Employee signature:</b> _____	<b>Date:</b> _____
<b>Witness signature (if any):</b> _____	<b>Date:</b> _____
<b>Signature of person presenting report:</b> _____	<b>Date:</b> _____