

EMPLOYEE WARNING NOTICE FORM



Employee Name: Rafael Quevedo

Date: 10/1/2025

Supervisor Name: Peter Draheim

Hire Date: 9/10/2024

- | | | |
|--|--|---|
| <input type="checkbox"/> Verbal Warning | <input type="checkbox"/> Written Warning | <input checked="" type="checkbox"/> Final Warning |
| <input type="checkbox"/> Coaching/Counseling Session | <input type="checkbox"/> Assignment End | <input type="checkbox"/> Termination |

1. Your behavior/actions have been found unsatisfactory for the following reasons:

- | | |
|---|--|
| <input type="checkbox"/> Tardiness | <input type="checkbox"/> Insubordination |
| <input type="checkbox"/> Damaged Equipment | <input type="checkbox"/> Failure to Follow Procedure |
| <input checked="" type="checkbox"/> Absenteeism | <input type="checkbox"/> Failure to Meet Performance Standards |
| <input checked="" type="checkbox"/> Policy Violation | <input type="checkbox"/> Poor Work Quality |
| <input type="checkbox"/> Falsifying Company Documents | <input type="checkbox"/> Other |

2. Details of Unsatisfactory Behavior/Actions:

Unexcused absence on 10/1/25

3. Prior Warnings:

Notification-10/2/24,10/14/24,10/15/24,11/13/24,11/14/24, and 11/15/24

Verbal warning-10/21/24,11/18/24, and 2/20/25,6/23/25

Written warning-11/29/24,12/2/24,3/10/25,3/11/25,3/31/25,7/11/25,7/18/25,8/18/25, 8/28/25,9/3/25, and 9/9/25

Final warning-12/3/24,12/20/24,9/18/25,9/19/25, and 10/1/25

4. The following immediate corrective action must be taken by the employee.

Rafael will need to show improvement with his attendance. He has exceeded the attendance policy. We will need to see him no call in for 5 months. If he does call in, his assignment may end.

Employee Signature: Rafael Quevedo Date: 10/1/25

Note: Your signature on this form means that we have discussed the situation(s).

Manager's Signature: Kellyn Suter Date: 10.1.25