



## Disciplinary Report Form

<b>Employee name:</b> Mu Hser	<b>Hire Date:</b> 12/08/14	<b>Job title:</b> Production
<b>Department:</b> Commissary	<b>Shift:</b> 1st	<b>Supervisor:</b> Denise Braucks

**Offense track:**     \_\_\_ Performance issue                    **X** 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

**X Absenteeism**

**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.)

**Mu has 5 absences within the first 6 months of employment. Attendance must improve immediately.**

<b>Completed by:</b> Taylor Barsness	<b>Date:</b> 1/30/15
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**(Shaded area to be completed by Human Resources only.)**

<b>Progressive step:</b> ___ Oral warning* ___ Suspension (unpaid) ___ Written reprimand ___ Release ___ Suspension (paid) *File apart from personnel files and copies thereof  <b>Written warning</b>	<b>Previous warnings:</b> Type: Offense: Date: Type: Offense: Date: Type: Offense: Date:  N/A
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**Consequence if incident occurs again: Final written warning**

<b>Human Resources Signature(s):</b> Taylor Barsness	<b>Date:</b> 1/30/15
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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.)

**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> 2/6/15
<b>Witness signature (if any):</b>	<b>Date:</b> 2/10/15
<b>Signature of person presenting report:</b>	<b>Date:</b> 2/6/15