



# Disciplinary Report Form

<b>Employee name:</b> John Nottom	<b>Hire Date:</b> 5/19/14	<b>Job title:</b> Production
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<b>Department:</b> Divers	<b>Shift:</b> 3rd	<b>Supervisor:</b> Miguel
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**Offense track:**  Performance issue  Work rule violation **Work rule violated, if any:**

**Type of offense:**  Absenteeism \_\_\_ Tardiness \_\_\_ Leaving work area without permission \_\_\_ Misuse of property/equipment \_\_\_ Damaging/Losing 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 \_\_\_ Fighting or creating conflict \_\_\_ Spreading gossip \_\_\_ Using vulgar language \_\_\_ Rudeness \_\_\_ Abusiveness \_\_\_ 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

X Attendance

**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.)

John has called in on 4 separate occasions missing a total of 32 hours.

<b>Completed by:</b> Taylor Bowers	<b>Date:</b> 7/23/14
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**(Shaded area to be completed by Human Resources only.)**

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

<b>Human Resources Signature(s):</b>	<b>Date:</b>
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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:** 7/23/14

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

None

**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.

**Employee signature:** [Signature] **Date:** 7/23/14 **Witness signature (if any):** [Signature] **Date:** 7/23/14 **Signature of person presenting report:** Miguel Quintanilla **Date:** 7/23/14