



EMPLOYEE WARNING NOTICE FORM

Employee Name: **Chase Monson**

Date: **5/12/2020**

Manager Name: **Christine Dockendorf**

First Warning **Second Warning** **Other**

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

- Tardiness
- Damaged Equipment
- Absenteeism
- Policy Violation
- Falsifying Company Documents
- Insubordination
- Failure to Follow Procedure**
- Failure to Meet Performance Standards
- Poor Work Quality
- Other

1. Details of Unsatisfactory Behavior/Actions:

On 5/11/20 Chase failed to follow forming change over procedure for product 12549. Product 12549 should have a waffle according to product specifications. Chase failed to verify product specifications causing the product to run with a score rather than a waffle.

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

Failure to do so will result in further disciplinary action up to and including termination.

Chase is expected to follow all policies and procedures in accordance with QA practices. Any further instances will result in further discipline.

Employee Signature: Chase cl Monson Date: 5-12-20

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

Manager's Signature: Christine Dockendorf Date: 5-13-2020

Change Over Form - Formax

Date: 5-11-20

Formax (Circle one)	F19-1	F19-2	F26	F19-1	F19-2	F26	F19-1	F19-2	F26	F19-1	F19-2	F26
Product Number	394856	391107	F26	12549								
Time (starting product)	7:10	17:43		2144								
Production EE initials	AD	AD		HR								
Formax Plate # / Spacer #	13518-26	13603		11224								
KO Cup #	13518-26	Ultimate		11224								
Fill System	Ultimate	Ultimate		11224								
Breather Plate	023015	023015		Big Hole								
Formax Setting (Fill setting / program)	4-1	4-1		4-1								
Pressure	110	160		100								
White totes emptied	START / YES / NO	START / YES / NO		START / YES / NO								
MD reject emptied (F26/south line only)	YES / NO / NA	YES / NO / NA		YES / NO / NA								
Puck placed on line	YES / NO / NA	YES / NO / NA		YES / NO / NA								
Verify correct patty shape, dimensions, and markings (score, waffle or none) Waffle verified point on point	YES / NO	YES / NO		YES / NO								
Review belt speeds to assure no deforming of patties during belt transfers	YES / NO	YES / NO		YES / NO								
Document Product Contact Packaging PO #	Patty Paper: N/A	Patty Paper: N/A		Patty Paper: N/A								
QA Comments												
QA EE Verification (Initials)	DK	LD		EM								
QA EE Verification Time	7:11A	12:48P		2:14P								
Comments / Deviations from Spec (Supervisor signature required)												

Reviewed By: _____ Date: _____