



Disciplinary Report Form

Employee name: Endrias Sime	Employee number: 108416	Job title: Production
Department: Rotary	Shift: 2 nd	Supervisor: Rick Nelson

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 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 Falsifying company documents

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.)

Endrias checked on his application that he had never been convicted of a crime. His background check came back otherwise.

Completed by: <i>Kelsey Adick</i>	Date: 5.13.11
---------------------------------------------	-------------------------

(Shaded area to be completed by Human Resources only.)

Progressive step: <input type="checkbox"/> Oral warning* <input type="checkbox"/> Suspension (unpaid) <input type="checkbox"/> Release <input type="checkbox"/> Written reprimand <input type="checkbox"/> Suspension (paid) *File apart from personnel files and copies thereof	Previous warnings: Type: Offense: Date: Type: Offense: Date: Type: Offense: Date:
<u>X</u> Discharge	

Consequence if incident occurs again:
NA

Human Resources Signature(s): <i>Steph L. Fowley, II</i>	Date: 5/16/2011
--------------------------------------------------------------------	---------------------------

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.

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



APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5 DATE 3-16-10

Name Sime, Endrias Michael
Last First Middle Initial

Present address 1534 4th Ave SEth Rochester MN 55904
Number Street City State Zip

How long 1 year Social Security No. 469-19-9097

Telephone 507-291-7185

If under 18, please list age _____ Referred by Monica Phupseevong

Position applied for (1) Forklift Days/hours available to work
 and salary desired (2) Shipping + Receiving No Pref Thur _____
 (Be specific) open to other positions Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

How many hours can you work weekly? open Can you work nights? _____

Employment desired ___ FULL-TIME ONLY ___ PART-TIME ONLY FULL- OR PART-TIME

When available for work? immediately

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?
 No ___ Yes If so, please explain _____

Do you anticipate any absences from work on a regular basis?
 No ___ Yes If so, please explain _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	<u>Richfield High</u>	<u>Richfield MN</u>	<u>4</u>	<u>diploma</u>
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No ___ Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____



Termination/Separation Checklist

Employee Name Endrias Seme

- Request Badge *secured*
 - Remove personal items from locker or break room
 - Last paycheck/PTO payout
 - Documents signed by employee
 - Disciplinary Paperwork and attached documentation
 - Notify employee "Inactive employees are not allowed on Reichel Foods property"
- Does not have anything*

Preparer Signature Kelsey Adickert Date: 5-16-11

HR Manager Signature [Signature] Date: 5/16/2011