



Disciplinary Report Form

Employee name: Martell Lightfoot	Hire Date: 8/16/15	Job title: Asst. LEad
Department: Production	Shift: 2nd	Supervisor: Miguel Q.

Offense track: Performance issue 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 **Not following food safety policies and procedures**

X Failing to follow instructions
X Not following food safety policies and procedures

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.)

Martell was seen twice not washing his hands after using the restroom. He was asked to wash his hands by Marco the floor leads and he still didn't wash his hands. This is a failure to follow our food safety policies and a leads instructions.

Completed by: Taylor Barsness	Date: 9/15/15
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(Shaded area to be completed by Human Resources only.)

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

Consequence if incident occurs again:
Final written warning

Human Resources Signature(s): Taylor Barsness	Date: 9/15/15
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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.

Employee signature: [Signature] **Date:** 9-16-15

Witness signature (if any): _____ **Date:** _____

Signature of person presenting report: [Signature] **Date:** 9-18-15

