



**EMPLOYEE WARNING NOTICE FORM**

Employee Name: **Limmie Varner**

Date: **December 11, 2017**

Manager Name: **Nick Rausch**

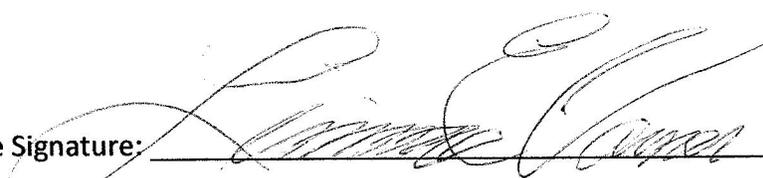
First Warning                       Second Warning                       Other

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

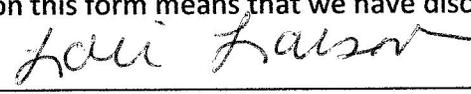
- |   |  |
|---|--|
| <input type="checkbox"/> Tardiness                    | <input type="checkbox"/> Insubordination                       |
| <input type="checkbox"/> Damaged Equipment            | <input type="checkbox"/> Failure to Follow Procedure           |
| <input type="checkbox"/> Absenteeism                  | <input type="checkbox"/> Failure to Meet Performance Standards |
| <input checked="" type="checkbox"/> Policy Violation  | <input type="checkbox"/> Poor Work Quality                     |
| <input type="checkbox"/> Falsifying Company Documents | <input type="checkbox"/> Other                                 |

1. Details of Unsatisfactory Behavior/Actions: **Limmie did not follow proper procedure when experiencing continued pain from a work-related injury. He went to the ER instead of informing us of his pain. Limmie had an appointment with Dr. Bachman already scheduled for today. He should have called Dr. Bachman's office to see if he could be seen immediately.**

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.  
**Limmie must contact CMG with any additional pain from work-related injuries. He cannot go to the ER on his own. Failure to follow proper procedure will result in further discipline.**

Employee Signature:  Date: 12-11-17

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

Manager's Signature:  Date: 12-11-17