



Employee Verbal Counseling Form

Employee Name: Peter Odial Date: 2-7-17

Department: I QF pack out Place of incident: I QF pack out

Indicate if: Coaching/Counseling Session Verbal Reprimand

Summary of incident and/or reason for warning or counseling:

Discussed the importance of following direction of leads, to apply a sense of urgency when needed and to talk to lead and other employees

Summary of corrective action needed:

with respect.
Same

It is expected that the condition noted above will be corrected immediately. In the event this condition is not corrected, or another offense occurs, you will be subject to further disciplinary action, up to and including termination.

Employee Signature _____ Date _____

(Your signature is intended only to acknowledge receipt of the notice; it does not imply agreement or disagreement with the notice itself.)

Manager Signature [Signature] Date 2-7-17