



Disciplinary Report Form

Employee name: Shew Reh	Hire Date: 10/05/2014	Job title: Commissary
Department: Production	Shift: 1st	Supervisor: Denise B.

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

X_ Absenteeism _

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.)

Shew has been absent on 3 separate. A verbal warning was gave that he must work on Sunday's unless he is scheduled off. Attendance must be improve immediately. Next occurrence a Final Warning will be issued.

Completed by: Katie Ritter	Date: 10/30/2015
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(Shaded area to be completed by Human Resources only.)

Progressive step: ___ Oral warning* ___ Suspension (unpaid) ___ Written reprimand ___ Release ___ Suspension (paid) *File apart from personnel files and copies thereof Written Warning	Previous warnings: Type: Offense: Date: Type: Offense: Date: Type: Offense: Date: 
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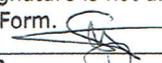
Consequence if incident occurs again:

Human Resources Signature(s): Katie Ritter	Date: 10/30/2015
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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:  Witness signature (if any): _____ Signature of person presenting report: 	Date: <u>10/30/15</u> Date: <u>10/30/15</u> Date: <u>10/30/15</u>
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