

YOUR LOGO
HERE

Company Name

Employee Warning Notice

Employee Information

Employee Name:

Date:

Employee ID:

Job Title:

Manager:

Department:

Type of Warning

Type of Absence Requested:

First Warning

Second Warning

Final Warning

Type of Warning

Tardiness/Leaving Early

Absenteeism

Violation of Company Policies

Substandard Work

Rudeness to Customers/Coworkers

Violation of Safety Rules

Other: _____

Manager Approval

Description of Infraction:

Plan for Improvement:

Consequences of Further Infractions:

Acknowledgement of Receipt of Warning

By signing this form, you confirm that you understand the information in this warning. You also confirm that you and your manager have discussed the warning and a plan for improvement. Signing this form does not necessarily indicate that you agree with this warning.

Employee Signature

Manager Signature

Witness Signature (if employee understands warning but refuses to sign)