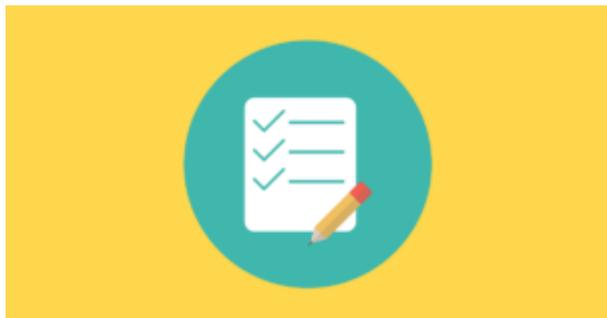


# Discipline Documentation Form



## EMPLOYEE INFORMATION

Employee's Name

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Employee's Job Title:

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## INCIDENT INFORMATION

Date/Time of Incident:

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Location of Incident:

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Description of Incident:

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Witnesses to Incident:

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Was this incident in violation of a company policy?     No                     Yes

If yes, specify which policy and how the incident violated it.

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**ACTION TAKEN**

What action will be taken?

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Has the impropriety of the employee's actions been explained to the employee?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Did the employee offer any explanation for the conduct? If so, what was it?

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Signature of person preparing report:

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Date: \_\_\_\_/\_\_\_\_/\_\_\_\_