

Adverse Behavior Record

Associate Name	
Department & Position	
Month	

Explanation of Occurrence (Give exact time, dates, and specific details.)

Employee's Remarks (If additional space is required, use reverse side.)

Check the type of action taken:

Verbal Warning
 Written Warning
 Suspension

Corrective Action to Be Taken

Your manager has recommended that you be terminated. The final decision will be made by the General Manager on the basis of the facts, company policy, and fairness. You are directed to report to your manager to learn the final decision on _____ at _____ o'clock.

During the period of suspension, the Human Resource Vice President will investigate the facts. If you believe you have information that will influence the decision, you should contact the Human Resource VP immediately.

Associate Signature Date

Manager Signature Date

Supervisor Signature Date

Witness Signature Date

If the associate refused to sign this notice, a witness should sign indicating that the form was read to the associate.