

# Written Employee Warning for Performance Issues

|                                        |                                                                                |
|----------------------------------------|--------------------------------------------------------------------------------|
| Employee Name:                         | Job Title:                                                                     |
| Supervisor Name:                       | Date of Occurrence:                                                            |
| Date of Written Warning:               |                                                                                |
| First Warning <input type="checkbox"/> | Second Warning <input type="checkbox"/> Final Warning <input type="checkbox"/> |

The purpose of this Written Warning is to identify performance issues, discuss improvements, and provide corrective action, necessary for continued employment with the company.

Reason for Written Warning *(Check all that apply)*

|                                                             |                                            |
|-------------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Poor work quality                  | <input type="checkbox"/> Policy violations |
| <input type="checkbox"/> Customer service complaints        | <input type="checkbox"/> Insubordination   |
| <input type="checkbox"/> Failure to meet production targets | <input type="checkbox"/> Low productivity  |
| <input type="checkbox"/> Other                              |                                            |

## Summary

*(Describe in detail each violation listed above and its date of occurrence)*

| Violation Type | Description of Violation | Date of Occurrence |
|----------------|--------------------------|--------------------|
|                |                          |                    |
|                |                          |                    |
|                |                          |                    |
|                |                          |                    |

## Prior Discussions

*(Note any prior discussions leading up to this warning)*

| <b><i>Date</i></b> | <b><i>Discussion Details</i></b> | <b><i>Link to Supporting Documents</i></b> |
|--------------------|----------------------------------|--------------------------------------------|
|                    |                                  |                                            |
|                    |                                  |                                            |
|                    |                                  |                                            |

## Corrective Action

| <b><i>Action</i></b> | <b><i>Due Date</i></b> |
|----------------------|------------------------|
|                      |                        |
|                      |                        |
|                      |                        |

Failure to follow the above corrective action plan to improve performance may result in further written warnings and/or permanent termination.

## Employee Statement

*(Employee rebuttal/statement to the above violations)*

## Employee Acknowledgement

My signature below indicates that I have read and received a copy of this document. My signature below does not indicate that I agree with the contents of this document.

Employee Name: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Supervisor/HR Acknowledgement

Supervisor Signature: \_\_\_\_\_ Date:

HR Signature: \_\_\_\_\_ Date:

Copies to:  
Employee  
Personnel File