

YOUR LOGO  
HERE

Company Name

## Employee Write Up

### Employee Information

Employee Name:

Date:

Employee ID:

Job Title:

Manager:

Department:

### Type of Warning

First Warning       Second Warning       Final Warning

### Type of Offenses

Tardiness/Leaving Early       Absenteeism       Violation of Company Policies  
 Substandard Work       Violation of Safety Rules       Rudeness to Customers/Coworkers  
 Other: \_\_\_\_\_

### Details

Description of Infraction:

Plan for Improvement:

Consequences of Further Infractions:

### Acknowledgment of Receipt of Warnings

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

