



**BETHUNE-COOKMAN UNIVERSITY
EMPLOYEE CORRECTIVE ACTION FORM**

Employee Name: _____ Date: _____

Department: _____ Job Title _____

Verbal Warning _____ Written Warning _____ Discharge _____

Give date, time, and place given _____

The above disciplinary action was taken against you today for:

<input type="checkbox"/> Attendance	<input type="checkbox"/> Inappropriate Behavior	<input type="checkbox"/> Dishonesty	<input type="checkbox"/> Negligence
<input type="checkbox"/> Safety	<input type="checkbox"/> Insubordination	<input type="checkbox"/> Use of Profane or Abusive Language	
<input type="checkbox"/> Tardiness	<input type="checkbox"/> Failure to Complete Action Plan	<input type="checkbox"/> Poor Performance	
<input type="checkbox"/> Inability to Perform Job	<input type="checkbox"/> Leaving Work Area W/O Permission	<input type="checkbox"/> Other	

Disciplinary Action:

Give a statement of the facts causing this action, including time and place, acts and names of persons involved

Action Plan:

- 1) _____
- 2) _____
- 3) _____

I delivered a copy of this form to the subject employee on _____ Date

Employee's Signature Date

Supervisor's Signature Date

I am aware that a copy of this notice will be placed in my personnel file.