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[Company Name]

[Date]

## Disciplinary Action Form

**Employee Information:**

* Name: [Employee's Full Name]
* Job Title: [Employee's Job Title]
* Department: [Employee's Department]
* Date of Incident: [Date of the Incident]

**Description of Incident:**
[Provide a detailed description of the incident or behavior that led to the disciplinary action. Include dates, times, locations, witnesses, and any relevant information.]

**Previous Discussions and Warnings:**
[Specify any previous discussions, verbal warnings, or written warnings related to the employee's behavior or performance.]

**Violated Policies or Expectations:**
[Identify the company policies, rules, or performance expectations that the employee has violated.]

**Disciplinary Action Taken:**
[Select the appropriate disciplinary action taken from the following options:]

* Verbal Warning: A formal verbal warning issued to the employee about their conduct or performance.
* Written Warning: A written warning documenting the employee's violation and outlining the consequences of further infractions.
* Suspension: Temporary suspension from work, with or without pay, based on the severity of the violation.
* Probation: Placement on a probationary period, during which the employee's performance will be closely monitored.
* Demotion: A change in the employee's job title or role as a result of the violation.
* Termination: Termination of employment based on the severity of the violation and/or repeated infractions.

**Disciplinary Action Details:**
[Provide additional details about the disciplinary action, including the date of the action, the person responsible for implementing the action, and any conditions or requirements for improvement.]

**Employee's Response:**
[Allow the employee to provide their response to the disciplinary action. Include a section for the employee to acknowledge receipt of the form.]

**Action Plan and Follow-Up:**
[If applicable, outline any action plan or performance improvement plan for the employee to follow. Specify a timeline for improvement and any support or resources provided to help the employee meet expectations.]

**Employee Acknowledgment:**

I, [Employee Name], acknowledge that I have received a copy of this Disciplinary Action Form and understand the details of the disciplinary action being taken. I have had the opportunity to discuss the incident and the disciplinary action with my supervisor.

Employee's Signature: [Employee's Signature]

Date: [Date]

**Supervisor's Comments:**

[Supervisor's comments on the disciplinary action, including any additional instructions or support provided to the employee.]

Supervisor's Signature: [Supervisor's Signature]

Date: [Date]

**HR Representative's Comments:**

[HR representative's comments on the disciplinary action, including any additional information or follow-up steps.]

HR Representative's Signature: [HR Representative's Signature]

Date: [Date]

**Witness (if applicable):**

* Full Name: [Full Name]
* Signature: [Signature]
* Date: [Date]

**Final Notes:**
[Add any additional comments, remarks, or notes related to the disciplinary action.]

This Disciplinary Action Form will be placed in the employee's personnel file for record-keeping purposes. All parties involved should retain a copy of this form for their records.

[Company Name] is committed to providing a fair and respectful workplace for all employees. We expect all employees to adhere to company policies and performance standards to maintain a positive work environment.

**Copy Distribution:**

* Employee
* HR Department (if applicable)
* Employee's Supervisor
* Employee's Personnel File