



- B. Time span for changes:
1. From (date) \_\_\_\_\_ to (date) \_\_\_\_\_
  2. Date and time of follow-up interview: \_\_\_\_\_

V. Disciplinary Action to be taken (be specific): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

VI. Employee Response:

- A. *I understand and agree the discussion is accurate and fair.*  
 Yes \_\_\_\_\_ No \_\_\_\_\_
- B. *I agree with the time frame for changes and commit myself to the change effort.*  
 Yes \_\_\_\_\_ No \_\_\_\_\_
- C. *I understand that if improvements are not made that it can result in my termination.*  
 Yes \_\_\_\_\_ No \_\_\_\_\_

***I REQUEST A HEARING OR DISCUSSION WITH HIGHER MANAGEMENT AND/OR PERSONNEL SINCE I CANNOT IN ALL SINCERITY UNDERSTAND AND AGREE TO THE SITUATION AS PRESENTED HEREIN.***

VII. Employee Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

To the employee: Your signature does not necessarily indicate agreement with the contents. It indicates that you have been shown this document and have had the opportunity to comment.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Section B

If the employee refuses to sign, the witness should complete this section.

This is to certify that the employee named in this report was shown a copy of this warning notice in my presence and refused to sign it.

Witness Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_