|  |  |
| --- | --- |
| **Date of Performance Issue :** |  |
| **Employee Name :** |  |
| **Job Title :** |  |
| **Supervisor Name:** |  |
| **Notice Description :** |  |
| **Today's Date :** |  |

**Work Behavior**

Type details here related to the behavior/performance/action the employee participated in that deserves a consequence/action

**Prior Supervisory / University Communication**

Type details here related to any prior communication or policies that supports the fact that the individual had enough information regarding the issue at hand

**Result of Behavior**

Type details here that outline the consequence as a result based on behavior or performance issue or concern

**Third Party Input (if applicable – Next Level Manager or Human Resources)**

Type details here – only for the next level manager or someone in HR if appropriate due to significance or involvement

**Employee Response**

I acknowledge that I understand the expectations and take full responsibility to meet performance standards, follow policies, procedures, and processes as well as all work rules. I understand that I am responsible for my actions and behaviors and understand the consequences of my actions. I further acknowledge that I have received a copy of this document for my records.

**Employee Comments** (handwritten comments from Employee)

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

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

Next Level Manager (Print name and sign if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Human Resources (Print name and sign if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_

**Attachment(s)**: