	PERFOR	RMANCE CORREC	CTION NOTICE	
Employee Name:	Department:			
Date Presented:		Supervisor:		
Disciplinary Level:				
Verbal Correction - ( <sup>-</sup> Written Warning	Γο memorialize the	e conversation.)		
Suspension – From:		To:	Total Hours:	
Subject:				
Policy/Procedure Violation Behavior/Conduct Infraction Other:		Performance Transgression Excessive Absenteeism/Tardiness		
Prior Notifications:				
Level of Discipline  Verbal  Written  Suspension	<u>Date</u>	<u>Su</u>	<u>bject</u>	
Persons Present as well as O			ring information: Time, Place, Date of all sheet if necessary).	Occurrence, and
Performance Improvement	Plan: Include SM	<b>ART</b> goals ( <b>S</b> pecifi	c, <u>M</u> easurable, <u>A</u> chievable, <u>R</u> elevant,	and <u>Time</u> -
pased). Also, include any trai	ning and/or specia	al direction to be pr	ovided (attach additional sheet if nece	:ssary) .
Outcomes and Consequence	es: Include positi	ive (what happens	if behavioral improves) and negative	(what happens
f behavioral does not improve	(attach additional	sneet if necessary	).	
performance improvement pla	n/expecations havuld my behavior/pe	ve been discussed	hat I have received a copy of this noti with me. I further understand I may b rove. Signing this form does not impl	e subject to
Employee Signature	Date		Supervisor Signature	 Date
_mployee dignature	Date	•	Supervisor Signature	Dale
03/24/2016			Department Head Signature	Date