



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Metro YMCA of the Oranges Employee Corrective Action Notice

Employee Name:	Position:
Supervisor's Name:	Department:
	Date Issued:

This is an official (please check one): Counseling / Early Intervention Warning Suspension

This form is being issued for the following reasons(s) (Explanation – specify facts leading up to warning):

Policy(ies) violated (if any):

Previous counseling or other disciplinary actions taken (indicate dates, reasons for and types of action taken if any):

Consequences of behavior/performance if appropriate (on Department, staff members, members, etc.):

Corrective action required and time line (include all time frames for improvement):

Identify follow-up training needs:

Follow-up meeting dates, if any:

If space provided on this form is insufficient, please attach additional pages.

This corrective action form will be placed in your personnel file. Failure to satisfactorily correct the problem(s) as stated in this corrective action form or any further occurrences in the future of this type or any other performance or conduct problems, may result in further discipline action including the possibility of suspension and/or termination. Immediate and sustained improvement is required.

_____ Supervisor's signature	_____ Date
I have read and understand the contents of this warning.	
_____ Employee's signature	_____ Date
Should the employee refuse to sign this form, the supervisor should request the presence of a second supervisor to witness that the employee read the warning and received a copy but declined to sign. The supervisor (witness) should note and sign.	
_____ Witness signature (if necessary)	_____ Date

Employee comments: _____
