

COMPLETED Formal Warning

Team Member Name Sharon Lehman

Date of Warning 4/12/XX Date of Incident 4/11/XX Time 9:15 a.m.

Description of incident:

Sharon was scheduled to start her shift at 8:45 a.m. She arrived and clocked in at 9:15 a.m.

Team member statement:

I agree disagree with the above statement and/or description. If there is disagreement, description of event from team member viewpoint:

Action: Warning
 Probation
 Suspension

Should a similar incident occur, the team member will be:

put on probation

Vivianne Moore

Employer Signature Date

Sharon Lehman

Team Member Signature Date