

PERFORMANCE CORRECTION NOTICE

Employee Name:	
Department:	
Supervisor:	
Date Presented:	

Verbal Correction Date:		
Written Warning Date:		
Probation Start Date:	Probation End Date:	
Final Warning:		
Prior Notifications:		

Level:	Date:	Subject:
Verbal		
Written		
Probation		
Final Written		

Verbal	Notice	Comments:
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Written Notice Comments:

Outcomes & Consequences:

Positive Outcomes:

Negative Consequences:	
Scheduled Review Date With Supervisor & HR:	
Employee Comments and/or Rebuttal:	
Employee Signature	Date

Employee Acknowledgment:

I have received a copy of this notification. It has been discussed with me, and I have been advised to take time to consider it before I sign it. I have freely chosen to agree to it, and I accept full responsibility for my actions. I understand that my position is now in jeopardy of being lost and that I must make substantial improvements in my performance in order to remain employed. By signing this, I commit to follow the College's standards of performance and conduct.

Employee Signature	Date
Human Resources Signature	Date
Witness (If Employee Refuses to Sign)	Date

Distribution of copies:

Employee

Supervisor

Department Head

Human Resources