



**Employee Verbal Warning or Written Reprimand Action Form**

Employee's Name Title  
Supervisor's Name Title  
Incident Date and Time Location  
Reprimand Date and Time Disciplinary Action to be Taken  
Reason for Action and/or Policy(ies) Violated

Witnesses (if applicable)

Description of the Incident that Occurred

Corrective and/or Disciplinary Action Implemented

Summary of Employee Explanation (if provided)

Future conduct of this nature may result in further disciplinary action up to and including termination. I acknowledge that I have read and understood the above information and consequences.

Employee's Signature Date Authorized Signature\* Date

\* "The corrective or disciplinary action may be initiated by the immediate supervisor with the knowledge of the (a) appropriate College administrator, or (b) in special cases, by the appropriate dean, director, assistant campus director, or vice president with the knowledge of the immediate supervisor" (Personnel Policy Manual, Section XII, 12.01)