# Employee Disciplinary Report

**Employee Last Name** | **Employee First Name** | **Employee Initial** | **Colleague ID (Not SSN)**
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**Department Name** | **Unit Administrator Name**
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**Position Title** | **Position Number (8-digits)** | **Date of Disciplinary Action**
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**Specific details of infraction**

**Corrective Action Expected of Employee**

**Time Frame to Resolve Problem**

## Employee's Statement

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**Employee's Acknowledgement**

I have read and understand this disciplinary report. My signature does not necessarily mean I agree with the findings of this report.

**Employee's Signature** | **Date**
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Previous edition, 07/05, may still be used.

2-1-034 (07/10)
Disciplinary Action  (Please check appropriate box)

- [ ] Written Warning
- [ ] Demotion, effective on _______________
- [ ] Suspension for ____ days
- [ ] Termination, effective on _______________

Explanation

<table>
<thead>
<tr>
<th>APPROVALS</th>
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<tbody>
<tr>
<td>Supervisor's Signature</td>
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<tr>
<td>Unit Administrator's Signature</td>
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Post-processing distribution: Original to HR, Copy to Supervisor, Unit Administrator, Employee

Continuation from any block above:

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