Courtesy of:
David K. Fischer
California Employer's Services
cesyes@hotmail.com
559-284-1912

Corrective Action Form 1

EMPLOYEE INFORMATION

Employee Name:	Position:
Manager:	Dept:
REASON FOR CORRECTIVE ACTION	
☐TARDINESS ☐ABSENTEEI	SM CONDUCT VIOLATION OF SAFETY RULES
☐INSUBORDINATION ☐PERFO	DRMANCE WORK QUANTITY OR QUALITY OTHER
	Details
DESCRIPTION OF INFRACTION:	
PLAN FOR IMPROVEMENT:	
I have read this infraction notice and	understand it.
Employee's Signature:	Date:
Supervisor's Signature:	Date:

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Corrective Action Form 2

Employee Name:	Date:
Your Performance was found unsatisfactory for the re	eason(s) below:
Details	
Your failure to improve or avoid a reoccurrence will be with company policy.	be cause for further corrective action in accordance
Improvement Plan	
A copy of this Corrective Action Form was personally	delivered to the above employee by:
Supervisor:	Date:
I have received and read this notice and also been inf personnel file in HR.	formed that a copy of this notice will be placed in my
Employee Signature:	Nate: