

Facilities Management WRITTEN REPRIMAND

Counseling Date: _____ Date of Incident: _____

Name of Employee: _____

Name of Supervisor: _____ Unit: _____

This is an official written reprimand that will become part of your official personnel file.

Please indicate the type of misconduct (refer to conduct examples found in the FM Guide):

Has this concern been discussed previously with employee? Yes No

If Yes, Indicate Date: _____

Comments and details (provide explanation of the incident including mitigating and/or aggravating circumstances): *Use additional sheet if necessary*

Instructions given for future conduct/behavior: *(Inform employee that any future incidents could result in issuance of a disciplinary suspension up to and including discharge from University service)*

I hereby certify that I have personally reviewed the above, and understand that my signature does not imply agreement or disagreement.

Employee's Signature

Date

Supervisor's Signature

Date

Please be advised that you have the right to grieve this action within 30 calendar days of receipt of this letter (See Policy on Grievances for Classified Employee and Associate Staff, available in Human Resources). You may also seek assistance in conflict resolution by contacting the FM Human Resources office.