## **EMPLOYEE LETTER OF COUNSELING**

Employee N	ame: Date of Notice
Position Titl	e:
Type of Problem	
Problem Oc	curred on: Date: Time Place:
Action Take	n on this notice:
	( ) Verbal with Counseling ( ) First Written with Discussion ( ) Second Written with Discussion ( ) Disciplinary Action
Supervisor [	Discussion with Employee:
Employee C	omments:
-	ation will be placed in your file and a copy sent to Human Resources along with any action taken.
Employee Si	gnature:
Witness (Un	ion Rep):
Supervisor S	signature: