



Archdiocese of Agaña

196 Cuesta San Ramon, Ste. B, ■ Hagåtña, GU 96910

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PROGRESSIVE DISCIPLINARY ACTION FORM

Date / Time:	
Employee Name:	
Department:	

TYPE OF ACTION TAKEN:

	Notice of Verbal/Oral Warning
	Notice of Written Warning
	Notice of Decision Making
	Notice of Administrative Reassignment
	Notice of termination
	Others:

Statement of the problem (violation of rules, policies, standards, practices or unsatisfactory performance):

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Prior Discussions or Warning on this subject: (oral, written, dates):

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Statement of Company Policy/Master Agreement on this subject:

Summary of corrective action to be taken (include dates for improvement and plan for follow-up)

Consequences of failure to improve performance or correct behavior:

Employee Comments if Necessary:

Effective _____ (date), you are placed to performance improvement. If, at any time after this date, you fail to meet expectations or to make sufficient progress towards expectations, disciplinary action may be escalated up to and including termination.

Distribution: One Copy Employee, One Copy to Supervisor/Dept. Head. One Copy to Human Resources Representative for Written Warning, Decision Making Day or Termination Only.

I fully understand the conditions and consequences of my status on Performance Improvement.

Employee Signature: _____ **Date:** _____

Supervisor Signature: _____ **Date:** _____

**Administration or
Department Head Signature:** _____ **Date:** _____

Human Resources Concurrence: _____ **Date:** _____

*Signature necessary only for Written Warning, Decision Making Day or Termination