

**ROGER WILLIAMS UNIVERSITY
MANAGER'S DOCUMENTATION OF DISCIPLINE NOTICE**

Employee's Name: _____ **Job Title:** _____

Note: This is a resource tool for Manager's use only and is not intended to replace the discipline and/or counseling memo.

Incident Information

Date/Time: ____/____/____ : ____ AM/PM			Place: _____		
Description: _____ _____ _____					
Witness Name(s): _____					
Was this incident a violation of a company policy?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Standard Operating Procedure?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		
A management directive?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Explain Violation: _____ _____					

Next Steps

What actions have been taken in the past when incidents like this occurred? _____ _____					
What action will be taken against this employee? _____ _____					
Has the problem been discussed with the employee?		<input type="checkbox"/> YES	<input type="checkbox"/> NO		
Did the employee offer any explanation for the incident? (Explain) _____ _____					

Any employee rebuttal? _____

Signature of Manager Preparing Report

_____/_____/_____
Date