

FORT BEND COUNTY WARNING NOTICE

FORM 6C

This document is official record of a warning notice issued and discussed with the employee due to a violation of policy or procedure, and shall be placed in the employee's personnel file.

Employee Name _____ Emp. ID _____

Date Issued _____

Supervisor, check those that apply:

Unauthorized absence

Failure to follow orders or carry out duties

Failure to call in for absence

Theft, destruction, misuse of County property

Tardiness

Violation of drug or alcohol policy

Dress code/uniform violation

Falsifying documents, including timesheet

Fighting, violence, intimidation

Other

Harassment

Inappropriate/unprofessional conduct

Supervisor's Comments

Supervisor Signature _____ Date _____

Employee: Your signature below indicates that the above infraction was discussed with you. If you have comments, you may submit them on a separate page.

Employee Signature _____ Date _____