1/10/23, 1:23 PM Client

## Performance Counseling Record

Employee	Date
	mm/dd/yyyy
Department	Manager
This form will serve as uniform documentation for the recording of employee counseling for corrective action by supervisors/managers. Performance counseling for corrective action is initiated when performance is unsatisfactory in such areas as attendance, quality, safety, productivity, or infraction of rules, policies, or procedures. Thoroughly complete both pages of this document	
Reason For Action (check all applicable)	If Other, Please Explain
☐ Performance ☐ Attendance ☐ Quality ☐ Safety ☐ Policy/Procedure Violation ☐ Other	
Result of Action (check one)  Verbal Written Written with suspension Final Written Termination Review Termination Other  Notes	
<ol> <li>Description of the problem/situation to be corrected. Include who, what, where, when and possible causes. (Specify relevant policies, procedures, practices, SOPs, memos, announcements, training, etc).</li> <li>History of similar conversations and/or previous coaching or counseling on this issue. Include specific dates, times, references to previous documentation, if any).</li> </ol>	
3. Description of the action to be taken to correct the problem. Identify expected corrective action – what is expected as the measurable outcome. Include description of solutions that were agreed to and a target/follow - up date to evaluate completion/correction.	
4. Next correction step if not resolved. Include description of the consequences to the employee if the situation is not corrected by the target date.	
Next Corrective Step (select one)  □ verbal counseling □ Written Counseling □ Final Written Counseling □ Review for Termination □ Termination □ other	
To Employee: your signature is required to acknowledge your receipt of this document. If you dispute any factual matters discussed above, please do so in writing within five (5) working days. A copy of your timely written response will be included in your personnel file.	
Employee Signature	Date
	mm/dd/yyyy
Manager Signature	Date
	mm/dd/yyyy
HR Signature	Date
	mm/dd/yyyy

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Submit Print

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