

Performance Referral

Company:	Personnel Action: □ Counseled
Supervisor's Name/Title:	□ Verbal/Written Warning
Phone#:	SuspendedTerminated
Fax#:	□ Other
Email:	Employee must contact Insight by:
Name of Employee Being Referred:	
Type of Referral (Circle one): Formal	nformal
Role & History with the company:	
Work Performance Issue (including specific behaviors, length of time of issue):	
Outcome Desired for Employee's Behavior:	

Insight EAP

Updated: 10/4/2023