



ATTENDANCE POLICY VIOLATION NOTICE

EMPLOYEE NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

SUPERVISOR NAME: \_\_\_\_\_

TEAM: \_\_\_\_\_

DETAILS OF OCCURRENCES

A = Absence C = Call-Off L = Leaving Early N = No Call/No Show T = Tardy
P = Missed Punch

OCCURRENCES DETAILS

Table with 5 columns: DATE, TYPE, POINT, CUMULATIVE TOTAL, COMMENTS. Multiple empty rows for data entry.

ACTIONS TO BE TAKEN AND CONSEQUENCES OF FAILURE TO IMPROVE

[ ] Verbal Warning \_\_\_\_\_ additional occurrence(s) before \_\_\_\_\_ will result in a Written Warning.
(Insert date – rolling 12-month period)

[ ] Written Warning \_\_\_\_\_ additional occurrence(s) before \_\_\_\_\_ will result in a Review for Termination
which may lead to Termination.
(Insert date – rolling 12-month period)

[ ] REVIEW FOR TERMINATION

[ ] TERMINATION

REQUIRED SIGNATURES

Signatures indicate I have read and understand this report

Signature of Employee: \_\_\_\_\_

Date: \_\_\_\_\_

Signature Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of HR: \_\_\_\_\_

Date: \_\_\_\_\_

Forward completed form to Human Resources.
A copy will be provided to the employee upon request, at the time of delivery of this Notice