**Record of Disciplinary Sanction**

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

**Employee name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Offence:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Type of sanction** (tick appropriate box):

|  |  |
| --- | --- |
| Verbal warning | Suspension without pay (specify period / dates) |
| First written warning | Demotion (only by agreement as an alternative to dismissal and specify position to which demoted) |
| Second written / severe warning |  |
| Final written warning |  |

**Period of validity of the sanction** (tick appropriate box):

|  |  |
| --- | --- |
| 3 months | 9 months |
| 6 months | 12 months |
| Other |  |

**MANAGEMENT REPRESENTATIVE:**

Signed (name and title): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**CONFIRMATION OF RECEIPT BY EMPLOYEE:**

I, the undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(employee’s name)hereby acknowledge receipt of this warning / sanction

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date and time: \_\_\_\_\_\_\_\_\_\_ Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IF EMPLOYEE REFUSES TO SIGN:**

I, the undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (witness’s name) hereby confirm that I witnessed this warning / sanction notification being handed to the employee named above.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date and time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_