## GEORGIA INSTITUTE OF TECHNOLOGY RECORD OF CORRECTIVE ACTION

EMPLOYEE'S NAME (PLEASE Type)			EMPLOYEE ID			
SUPERVISOR'S NAME (PLEASE Type)			DATE			
TYPE OF CORRECTIVE ACTION (Check One)						
☐ Verbal Warning			☐ Written Reprimand			
Type of Warning (Check Applicable)						
	Absence			Harassment		
	Tardiness			Dishonesty		
	Violation of GT Policy			Violation of Safety Rules		
	Smoking in Unauthorized Areas			Leaving Work without Authorization		
	Failure to Follow Instructions			Poor Performance		
	Unauthorized Use of Equipment/Materials			Insubordination		
	Falsification of Records			Other:		
Summary of Violation:  Summary of Corrective Plan of Action:						
SUPERVISOR'S SIGNATURE DATE E			EMPLO	DYEE'S SIGNATURE	DATE	
MANAGER'S SIGNATURE DATE		NOTE: THE EMPLOYEE'S SIGNATURE INDICATES THAT THE NOTICE HAS BEEN GIVEN. IT DOES NOT NECESSARILY IMPLY AGREEMENT WITH CONTENTS.				