



DIOCESE OF  
FORT WAYNE-SOUTH BEND

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## Corrective Action Form

Date:

Choose one:

- 1<sup>st</sup> filing of corrective action
- 2<sup>nd</sup> filing of corrective action
- Last chance of corrective action
- Dismissal

Employee Name (Position): \_\_\_\_\_

Employee Supervisor (Position): \_\_\_\_\_

Human Resources Director: \_\_\_\_\_

List all others present at meeting: \_\_\_\_\_

Nature of Violation:

- Safety    Attendance    Policy Violation    Tardiness
- Unsatisfactory Work    Moral Conduct    Other

Did Supervisor observe the Performance and/or Conduct Issue(s):    Yes    No

Date Set for follow up meeting (approximately two weeks):

Performance and/or Conduct Issue(s) for concern: (Include Statement of the Problem, Violation of Rules, or Unsatisfactory Performance, Dates Issue(s) Occurred, Location Issue (s) Occurred).

(Continue on next page)

Immediate Correction Action Taken

Suspension: Yes    No

If yes, how many days?

If this was not the first meeting with the employee, were the performance and/or conduct issue(s) resolved? If not re-evaluate the Plan for Personal Improvement: (Include time frame for correction)

Plan for Personal Improvement for Employee: (Identify the below listed Performance Factors/Skills that need improvement and list specific actions that will be taken to assist the employee in those areas that require performance improvement. It is suggested that the supervisor and employee develop this plan jointly in a discussion session. These actions should focus on activities, tasks, training, expanded job duties, etc., that will allow the employee an opportunity to develop the needed skill.)

Performance Factors/Skills- Job Knowledge, Planning, Organizing, Directing, Controlling, Developing People, Problem Analysis, Decision making, Interpersonal Relations, Communication, and Safety

(Continue on next page)

I have read this "document." *(Print to sign.)*

Employee's Signature: \_\_\_\_\_ Date:

Supervisor's Signature: \_\_\_\_\_ Date:

Human Resource Director's Signature: \_\_\_\_\_ Date:

All others present Signatures:

\_\_\_\_\_  
\_\_\_\_\_

Employee Comments: