

**BOWDOIN COLLEGE
EMPLOYEE WRITTEN WARNING RECORD**

Employee's Name: _____ Department: _____

Position _____ Date of warning: _____

WARNING

Date of Incident: _____ Time: _____ Place: _____

Nature of Incident (please specifically describe):

Expected changes in employee behavior/performance:

Time frame for demonstrated improvement or remediation:

Action to be taken if satisfactory changes do not occur:

Supervisor's remarks:

Please use additional page if necessary

Has employee been warned previously? No Yes

Type of Warning	On what date and by whom		
	1 st Warning	2 nd Warning	3 rd Warning
Oral			
Written			

Employee's remarks:

I acknowledge that the above warning has been reviewed with me, that I understand it, and that I have received a copy of this warning.

Signature of employee

Date

Signature of a witness that warning has been discussed with employee, only if employee declines to sign.

Signature of supervisor

Date