NOTICE OF DISCIPLINARY ACTION

Employee: Department:		Date of Hire/Seniority:	
Action Taken:	Written Reprimand	Suspension	Discharge
Description of Misco	onduct:		
Return to Work:			
Copy to Employee			
	Date & Time	Employee's Signature	
Copy to Steward* Date & Time		Steward's Signature	
		<i>U</i> -	
Supervisor's Signature		Department Head Signature (If Required)	
*Forward copy to Stew	vard		
		G: Publisher/Payroll/Payroll Forms/Discip	olinary Action 6/02