



COMMUNITY & RECREATION SERVICES

MT. DIABLO CARES AFTER SCHOOL PROGRAM  
EMPLOYEE INCIDENT WARNING



EMPLOYEE NAME	DATE OF WARNING
PROGRAM/POSITION	SITE

**TYPE OF VIOLATION**

- |   |   |
|---|---|
| <input type="checkbox"/> Poor attendance                                | <input type="checkbox"/> Violation of program policies and procedures |
| <input type="checkbox"/> Lateness or leaving early                      | <input type="checkbox"/> Insubordination                              |
| <input type="checkbox"/> Rudeness to employee or student/families       | <input type="checkbox"/> Violation of safety rules                    |
| <input type="checkbox"/> Unsatisfactory work quality                    | <input type="checkbox"/> Working on personal matters                  |
| <input type="checkbox"/> Failure to notify program of absence/tardiness | <input type="checkbox"/> Other _____                                  |

**PREVIOUS WARNINGS**

WARNING	ORAL	WRITTEN	DATE	GIVEN BY
1st	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
2nd	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3rd	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4th	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

**EMPLOYER STATEMENT**

Date of Incident \_\_\_\_\_ Time of Incident \_\_\_\_\_  a.m.  p.m.

- I agree with the Employer's statement.
- I disagree with the Employer's description of violation for these reasons \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**ACTIONS TO BE TAKEN**

- |                                    |   |                                    |
|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> Warning   | <input type="checkbox"/> Remove from Schedule | <input type="checkbox"/> Dismissal |
| <input type="checkbox"/> Probation | <input type="checkbox"/> Other _____          |                                    |

Consequences should the action occur again \_\_\_\_\_

***I have read this Employee Incident Notice and understand it.***

_____ EMPLOYEE'S SIGNATURE	_____ DATE
_____ SUPERVISOR'S SIGNATURE	_____ DATE