FAIRLEIGH DICKINSON UNIVERSITY EMPLOYEE GUIDANCE RECORD

EMPLOYEE GUIDANCE RECORD						
LAST NAME, FIRST NAME			SOCIAL SECURITY # LOCATION			DEPARTMENT
TYPE OF NOTICE: UVERBAL WRITTEN (#)						
NATURE OF VIOLATION: Substandard Work Carelessness Policy Violation Insubordination						
NATURE OF VIC		Substandard v		Carelessness Absenteeism	☐ Policy Violation☐ Misconduct	☐ Insubordination ☐ OTHER
B faldiness B Absenteersin B Misconduct B Office						
Explain facts in detail, and provide date(s):						
				· · · · ·		
Provide date(s) and explanation of prior counseling sessions, if applicable.						
Date: Explanation:						
		-				
PLAN OF ACTION						
Explain plan of action in detail:						
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Failure to correct this situation will result in:						
		 				
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Fallow we date. On severate						
Follow-up date:	Comments:					
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Employee's Comments/Statement:						
Employee a commentatoristement.						
				 		
	·					
Additional documentation attached as needed (description):						
						
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Signatures:						
Signatures:					Date	,
Employee:	ura je an aakna.	dedagment the	thic matter	e diecuseed\	Date	·
(Employee's signat	ure is all acknow	neugement mai	t ans mader wa	is uiscussed)		
Manager:					Date	:
Director:			······································		Date	
Human Resources:			<u> </u>		Date	
- minum nosculces.	•				Date	···