

REQUEST FOR DISCIPLINARY ACTION

INSTRUCTIONS: This summary is to be prepared by a supervisor immediately after an incident involving an employee's performance or conduct occurs when the supervisor has a reasonable basis to believe that discipline may be warranted.

THINGS TO DO:

- Prepare this Incident Summary.
- Obtain signed witness statements.
- Review the completed Incident Summary with your Department Head or Director promptly and have them sign in the space provided below.
- Submit completed Incident Summary, witness statements and any evidence to Labor Relations – For Time and Attendance issues please submit copy of last written counseling and appropriate time sheets.
- Call Employee and Labor Relations if you have any questions.

INCIDENT SUMMARY

Please Print

Employee Name: _____ Title: _____

Status: Probationary / Temporary / Term / Permanent Shift: _____

Date of Incident: _____ Time of Incident: _____ Location of Incident: _____

Witnesses: Name(s) _____ Work Phone Number _____

Did you personally witness incident? _____

If not, how did you become aware of incident? _____

When did you become aware of the incident? _____

Did the incident involve a patient/guest/student? _____

If so, did the patient/guest file an incident report? _____

Describe what happened in detail, i.e., actions and/or statements of the employee(s), instruction to employee(s), statements of witnesses, physical evidence, and your remarks, what did the employee(s) and you do or say.

Signature of Supervisor/ Date

To: Labor Relations: Please investigate this incident to determine if disciplinary action is warranted.

| Employee and Labor Relations: | | | | |
|-------------------------------|--------|-----|----------|----------|
| | Campus | Zip | Phone | Fax |
| West Campus | 0751 | | 632-6140 | 632-2544 |
| HSC/UH | 8229 | | 444-3780 | 632-2545 |
| LISVH | 9500 | | 444-8617 | 444-8517 |

Signature of Department Head/Director