



Disciplinary Action Form

Date: _____

Team Member Name: _____

Dealership & Department: _____

Type of Violation:

___ Attendance

___ Tardiness

___ Disobedience

___ Work Quality

___ Other: _____

Type of Action:

___ Warning: ___ First Warning ___ Second Warning ___ Final Warning

___ Suspension: Begins _____ Ends _____

___ Termination: Effective _____

___ Other: _____

Notes/Comments:

Team Member _____

Print Name

Signature

Manager _____

Print Name

Signature