

WRITTEN WARNING / DISCIPLINARY ACTION(S)

Project: _____ Job No.: _____
Superintendent: _____ Date: _____

WRITTEN WARNING FOR SAFETY VIOLATION(S)

To: _____ Employee No.: _____
EMPLOYEE'S NAME

Date of Violation(s): _____ Time of Violation(s): _____

Location of Violation(s) Noted: _____

Type of Violation: Regulatory Agency Company Policy

This is to advise you that on the above date you were found to have violated either a Regulatory Agency Standard and/or a safety requirement of the Company Safety Manual. The violation(s) is noted as follows:

You are further advised that repeated violations of prescribed safety rules and regulations will not be tolerated on this project. Violations may result in injury to yourself or your fellow workers, thus we are warning you that should you not correct your actions and conscientiously observe the safety program on this project, you will subject yourself to further disciplinary actions up to and including discharge.

EMPLOYEE'S SIGNATURE SUPERVISOR'S SIGNATURE

Disciplinary Action Taken: _____

Employee Evaluation completed Yes ____ or No ____