

Archdiocese of Seattle

EMPLOYEE CORRECTIVE ACTION REPORT

Employee information

Employee name	Date	[Date]
Employee ID	Job Title	
Manager	Department	
Type of Corrective Action	Reason	

Description of Incident

Plan for Improvement

Consequences of Further Incidents

(Example: Continued failure to follow through on responsibilities and letting key tasks fall through the cracks will result in further disciplinary action up to and including termination.)

Acknowledgement of Receipt of Corrective Action

By signing this form, you confirm that you understand the information in this Corrective Action Report. You also confirm that you and your manager have discussed the incident and have created a plan for improvement. Signing this form does not necessarily indicate that you agree with this report.

Employee Signature

Date

Manager Signature

Date

Witness Signature (if employee understands Corrective Action but refuses to sign)

Date