



**Town of Halifax**  
**Wage and Personnel Board**  
**499 Plymouth Street,**  
**Halifax, Massachusetts 02338**

## **DISCIPLINARY REPORT**

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_

Date of Occurrence: \_\_\_\_\_ Time of Occurrence: \_\_\_\_\_ Location: \_\_\_\_\_

### **Action Taken:**

\_\_\_\_\_ Verbal Warning          \_\_\_\_\_ Written Warning          \_\_\_\_\_ Probation

Suspension \_\_\_\_\_ days          \_\_\_\_\_ Termination          \_\_\_\_\_ Other

### **Description of Issue:**

\_\_\_\_\_ Absence          \_\_\_\_\_ Safety Violation          \_\_\_\_\_ Conduct          \_\_\_\_\_ Performance Issue

\_\_\_\_\_ Tardiness          \_\_\_\_\_ Policy Violation          \_\_\_\_\_ Other \_\_\_\_\_

Explanation/Comments (You may attach additional pages, if necessary)

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Goal (s)/Corrective action(s):

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My signature below acknowledges that I have formally been warned about the situation referenced in this document. I acknowledge that failure to correct this behavior and/or any further violation of the policies of the Town of Halifax will result in additional disciplinary action up to and including immediate termination.

Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Department Head: \_\_\_\_\_ Date: \_\_\_\_\_

1 copy Employee's Personnel File (Sealed envelope Treasurer's office)  
1 copy Employee  
1 copy Department Head