

FARM NAME \_\_\_\_\_

**DOC 3.24 Form for Documenting Corrective Action**

Date of Violation \_\_\_\_\_ Date of Disciplinary/ Corrective Action \_\_\_\_\_

Explanation of Violation: Employee related \_\_\_\_\_ Farm related \_\_\_\_\_

*If employee related, then give employee name \_\_\_\_\_*

**Description of the Violation:**

**Disciplinary/Corrective Action:**

Date of Completion of Corrective Action if Farm related \_\_\_\_\_

**Employee/Supervisor Comments:**

**The Supervisor notifies the employee of the violation and explains the reasoning behind the regulation**

First Offense- Verbal Warning Date: \_\_\_\_\_

Second Offense- Written Warning Date: \_\_\_\_\_

Third Offense- Disciplinary Date: \_\_\_\_\_ Action taken: \_\_\_\_\_

Supervisor has given appropriate warning Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor has completed farm related corrective action Signature \_\_\_\_\_ Date \_\_\_\_\_

Employee understands significance of the violation Signature \_\_\_\_\_ Date \_\_\_\_\_