

Alabaster City Schools Notice of Disciplinary Action System Form for Personnel File

ISSUED TO:				
NAME:		DATE:	EMPLOYEE #	
JOB TITLE:		LOCAT	LOCATION/DEPT:	
TYPE OF ACT	ION:			
I.	DISCIPLINARY ACTION IS BE	EING TAKEN FOR THE FOLLO	WING REASONS (INCLUDE DATES)	
II.	THE FOLLOWING CORRECTIVE ACTION IS EXPECTED			
EMPLOYEE'S	SIGNATURE		DATE	
	ges receipt of; not necessarily of rebuttal to be placed in file if s		. Employee acknowledges the righ	
SUPERVISOR ⁴	'S SIGNATURE		DATE	
WITNESS/OTHER			DΔTF	