

Employee Counseling Form

Employee Name:		Date:
Job Title:	Supervisor:	
Action Taken		
☐ Verbal Warning/Counseling ☐ Referral to Human Resources		
Facts: Date/Time of Incident: Type of Incident:		
Employee's Explanation:		
Employer's Expectations:		
Action Plan:		
Action Taken:		
Next Action Step:		
Supervisor signature:		Date:
Human Resources signature:		Date:
A copy of this form will be placed in the employee's personnel file for reference		
Original: UF Human Resources Copy: Department Head Copy: Supervisor		

Supervisor Instructions

Guidelines for using the Employee Counseling Form

When documenting corrective action, it is helpful to adhere to the following guidelines:

- Facts - List only facts, not opinions. Give concrete examples, when possible, to document the incorrect behavior.
- Objectives - What is the desired outcome? What do you expect? You may want to cite a portion of the job description or a policy.
- Solutions - How do you suggest that the employee improves his or her performance? Does the employee have any suggestions? You may offer additional training, review of procedures, etc.
- Action - Tell the employee in writing that he or she is receiving a warning, recommendation for suspension, etc. and set a date to review his or her progress towards obtaining the goals set

Directions for Submitting the Employee Counseling Form

Please use additional forms if the employee has more than one area that needs improvement.

The supervisor should give a copy of the signed document to the employee, keep a copy for the department supervisor and send the original to the Human Resources in a sealed envelope. The *Employee Counseling Form* will be placed in the personnel file.