



MANAGER'S CHECKLIST FOR FINAL DISCIPLINE

Complete prior to decision.

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| Employee's Name: | Date: |
| Time With Organization: | Department: |
| PROBLEM: | |
| Employee(s) involved. | |
| Details of what happened. | |
| How did it happen? | |
| Specific facts to be considered (no opinions). | |
| Did you give the employee a chance to tell his/her side of the story? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain. | |
| Was your interview with the employee in private? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Was the employee aware of the rule, procedure, or policy being breached? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Was the rule published in writing and disseminated to all employees? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have written confirmation of receipt of that communication? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Explain how the rule has been enforced in the past. | |
| What changes in behavior needed to be made? | |



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| Have past changes affected current situations? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Explain. | |
| What is the employee's past record? | |
| Can you back up this record with facts? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Did the employee have any previous warning? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Has this violation been previously overlooked? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| According to policy, what is appropriate and justifiable discipline? | |
| <input type="checkbox"/> Verbal warning <input type="checkbox"/> Written warning <input type="checkbox"/> Placed on probation <input type="checkbox"/> Discharge | |
| In your opinion, will corrective action prevent a recurrence and encourage better performance? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Did you check with any/all of the following before taking disciplinary action? | |
| <input type="checkbox"/> Your Manager <input type="checkbox"/> Human Resources <input type="checkbox"/> Other Executives | |
| FUTURE ACTION | |
| Is any follow-up action necessary? How do you plan to monitor? | |
| Have you recorded this incident and put a copy in the employee's personnel file? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you allowed the employee to impart a rebuttal? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

For a free 30-minute consultation on conducting a disciplinary coaching session, [click here](#).