

# Human Resources

## Corrective Action Notice (HR-19)

Applicable policy: [UNT Policy 5.033](#); [UNTHSC Policy 5.108](#); [UNT Dallas Policy 5.021](#); [UNT System Administration Policy 3.403](#)

Employee Name: \_\_\_\_\_  
 Supervisor: \_\_\_\_\_  
 Department: \_\_\_\_\_

Employee ID: \_\_\_\_\_  
 Supervisor ID: \_\_\_\_\_  
 Date of this action: \_\_\_\_\_

### Level (check one)

Coaching/Counseling Session  
 Verbal Warning  
 Written Warning

Final Written Warning  
 Final Written Warning w/Suspension without Pay

### Prior Notification (if any, check all that apply)

Coaching Session	Date: _____
Verbal Warning	Date: _____
Written Warning	Date: _____
Final Written Warning	Date: _____
Final Written Warning w/Suspension	Date: _____

Reason: \_\_\_\_\_  
 Reason: \_\_\_\_\_  
 Reason: \_\_\_\_\_  
 Reason: \_\_\_\_\_  
 Reason: \_\_\_\_\_

### Incident Description and Supporting Details

1. Outline details of what occurred to include time, place, date(s) as well as impact on the department and institution.

2. List any policy violations:

### **Actions Necessary to Bring About Improvement**

Your performance in the following area(s) is expected to improve immediately. You are expected to: *(list expectations with any specific directions or training that may be applicable)*

You are expected to perform your job duties efficiently and accurately on a consistent and on-going basis and to comply with all rules, policies, procedures and standards of conduct established by the university and your division or department. You are also expected to conduct yourself in a manner that instills the highest confidence in the abilities and integrity of public servants. Failure to meet these responsibilities can result in further disciplinary action, up to and including termination of employment.

### **Suspension (write N/A if not applicable)**

You are placed on suspension with/without pay for \_\_\_\_\_ working day(s) effective on the date of receipt of this Corrective Action Notice. In addition, you will:

**Employee's Comments:**

## Employee Acknowledgment

*If you are a non-faculty employee and you believe that this action violates an existing UNT System policy or administrative directive; violates an existing state or federal law or regulation; or that the conduct of which you are being disciplined constitutes the exercise of a constitutional right or a statutorily protected activity, you may utilize the complaint/grievance process as described in [UNT System Administration Policy 3.1001](#), [UNT Policy 5.042](#), [UNTHSC Policy 5.109](#), and [UNT Dallas Policy 5.005](#).*

I have received a copy of this notification. It has been explained to me, and I have been advised to take the time to read it before I sign it. My signature acknowledges receipt of the notification, but not necessarily agreement with the statements made in it.

Supervisor's Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

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

Witness, if employee refuses to sign: \_\_\_\_\_ Date: \_\_\_\_\_

## Distribution

Original to Employee

Copy retained by Supervisor/Department

Copy to Human Resources at employee's employer (UNT, UNTHSC, UNT Dallas, or UNT System Administration)

\*Sign this document using Adobe Digital ID