



**PERFORMANCE CORRECTION NOTICE**

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**Corrective Level:**

- Verbal Correction
- Written Reprimand
- Delay of Step Increase
- Corrective Probation (End date: \_\_\_\_\_)
- Suspension (Date: \_\_\_\_\_)
- Demotion
- Termination

**Occurrence:** *(one sentence summary of incident)*

- Performance
- Conduct
- Attendance

**Prior Notifications:**

Level of Discipline

Subject

- Verbal \_\_\_\_\_
- Written \_\_\_\_\_

**Incident Description and Supporting Details:**

Include the following information: Description of Incident, Date of Occurrence, Persons Present as well as Organizational Impact. Attach additional pages. *(If necessary)*

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## PERFORMANCE CORRECTION PLAN

*Immediate and sustained improvement is expected.*

1. Measurable/Tangible Correction Goals:

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Targeted completion date: \_\_\_\_\_

2. Training or Special Direction Provided:

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3. Interim Performance Evaluation Date(if necessary):

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4. In addition, I recognize that you may have certain ideas to improve your performance. I encourage you to provide your own Personal Correction Plan Input and Suggestions.

(Attach additional sheets if needed.)

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### OUTCOMES and CONSEQUENCES

**Positive:** If you meet your Correction goals, no further corrective action will be taken regarding this issue.

**Negative:** (Describe the consequence should the incident occur again) Future policy violations or failure to perform job duties in an acceptable manner will result in additional corrective action up to and including termination.

Scheduled Review Date (if applicable): \_\_\_\_\_

Employee Comments and/or Rebuttal (Attach Additional Sheets, if needed):

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\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date



## EMPLOYEE ACKNOWLEDGEMENT

I understand that the City of Stephenville is an “at-will” employer, meaning that my employment has no specified term and that the employment relationship may be terminated at any time at the will of either party. I also realize that the City of Stephenville is opting to provide me with corrective action measures, and can terminate such corrective measures at any time, solely at its own discretion, and that the use of progressive discipline will not change my at-will employment status.

I have read the Performance Correction Notice and understand it. It has been discussed with me, and I have been advised to take the time to consider it before I sign it. Signing this, I commit to follow the city’s standards of performance, conduct, and attendance.

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Employee Signature

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Date

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Witness Name

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Date Witness: (if employee refuses to sign)

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Supervisor’s Signature

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Date

A copy of this document will  
be placed in your file.