

ODYSSEY BUSINESS SERVICES, INC.

NOTICE OF WARNING

Employee Name: _____

Date _____

Social Security Number: _____

Odyssey Client Name _____

This warning is issued for:

Violation of Company rules

Absenteeism/Tardiness

Alcoholic/Drug violation

Insubordination

Negligence

Other Misconduct

Failure to follow Instructions and /or Procedures

Describe the Incident(s) (include date and witnesses): _____

Recommendation for Improvement:

This warning is for (check one):

First Warning

Second Written Warning

Final Warning

Notice of Suspension for Discipline

My signature indicates my understanding of this warning and my acknowledgement that further continuance of this or any other types of misconduct may result in my termination.

Supervisor signature: _____

Date: _____

Employee Signature : _____

Date: _____

Witness Signature: _____

Date: _____