Employee Attendance Violation Form

Employee's Name: _____

Manager's Name: _____

Date of attendance violation: _____

Type of violation (select all that apply)

- ☐ Late Arrival
- ☐ Same day callout (calling out sick on a scheduled day)
- ☐ Same day callout (within 2 hours of center opening)
- ☐ Unexcused absence/s
- ☐ Unexcused sick days (sick for more than one day without a doctor's note)
- ☐ Exceeded approved number of PTO days (Exempt/Salaried Employees)
- ☐ Exceeded approved number of UTO days (Non-Exempt/Hourly Employees)
- ☐ Unapproved overtime hours
- ☐ Did not show up for work or communicate absence to management
- ☐ Averaging less than 30 hours per week (6 week average)
- ☐ Other (List Reason:_____

_____

_____

Employee's Comments: _____

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Manager's Comments: _____

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Recommendation by manager: _____

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Employee’s Signature: _____ Date: _____

Manager’s Signature: _____ Date: _____