

# Employee Behavior Correction Statement

Employee Name:

Employee ID:

Department:

Supervisor Name:

Date:

## Description of Behavior

Describe the behavior that needs correction...

## Expected Behavior

Describe the desired/expected behavior...

## Action Plan

List steps to correct the behavior and support/resources provided...

## Follow-up/Review Date

## Employee Signature

---

Date

## Supervisor Signature

---

Date

