

**COMMUNITY ACTION, INC. OF HAYS, CALDWELL AND BLANCO COUNTIES
Counseling Statement**

To: _____ **Date:** _____
Employee Name

From: _____
Supervisor Name

Re: _____
Violation/Issue

- 1. I have made the following observations of this employee's conduct:**

- 2. I have informed this employee of the following standards that will be expected from him/her in the future:**

- 3. These standards are important because of the following impact on the work environment:**

- 4. I have informed this employee of the following consequences if s/he fails to follow the above standards:**
Future occurrences will result in further documentation up to and including termination.

- 5. These matters will be reviewed within:** _____ days or, on an ongoing basis.
(Only one box can be checked – if days, must quantify)

Supervisor's Signature Date

I have read and received a copy of the above statement. I Do , Do Not , wish to submit written comments of my own about this matter.

Employee's Signature Date

Comments by employee:
