## **Social Media Misconduct Disciplinary Action Form**

## **Employee Information**

Employee Name	
Employee ID	
Department	
Position	
Incident Details	
Date of Incident	
Social Media Platform	
Coolar Modia Frationii	
Link to Post/Content (if applicable)	
Description of Misconduct	
Investigation Summary	
Summary of Findings	
Company Policy Violated	
Disciplinary Action	
Type of Action	
Details of Action	•

Effective Date	
Ciamatuwaa	
Signatures	
Supervisor/Manager Name	
Supervisor/Manager Signature	
Date	
Employee Name	
Employee Signature	
Date	