## **Time Theft Disciplinary Action Form**

| Employee Name           |   |
|-------------------------|---|
|                         |   |
| Employee ID             |   |
|                         |   |
| Department              |   |
|                         |   |
| Position                |   |
|                         |   |
| Date of Incident        |   |
|                         |   |
| Reported By             |   |
|                         |   |
|                         |   |
| Description of Incident |   |
|                         |   |
| Investigation Details   | _ |
|                         | _ |
|                         |   |
| Type of Violation       |   |
|                         |   |
| Evidence (if any)       |   |
|                         |   |
|                         | _ |
|                         |   |

Disciplinary Action Taken

| Effective Date of Action |  |  |
|--------------------------|--|--|
|                          |  |  |
| Manager/Supervisor Name  |  |  |
| Employee Signature       |  |  |
|                          |  |  |
| Date Signed              |  |  |
|                          |  |  |