**Written Notice**

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| **Section One** |
| **Employee Name** *(Last Name, First, Middle Initial)*      | **Employee ID**      |
| **Offense Date(s)**       | **Issued Date**      | **Inactive Date\***      |

**\*** The inactive date is the issued date: plus 2 years for a Group I Notice, plus 3 years for a Group II Notice, or plus 4 years for a Group III Notice.

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| **Section Two** |
| **Type of Offense:** Check one and include Offense Category (See page 3 for Written Notice Codes/Categories) |
| **[ ]**  Group I:       | **[ ]**  Group II:       | **[ ]**  Group III:       |
| **Nature of Offense and Evidence:** Describe the offense and provide an explanation of the evidence. Describe any circumstances or background information used to support the disciplinary action. Additional documentation may be attached. Documentation attached? [ ]  Yes       (*# of pages)* [ ]  No |
|       |

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| **Section Three** |
| If disciplinary action is being taken, please select the appropriate action below.  |
| **[ ]  Suspension*** Suspension from       through
* Number of days suspended\*
* Return to work

*\*Note: FLSA-exempt employees may be suspended for whole days only* |
| **[ ]  Transfer or Demotion** check below as appropriate [ ]  Reduced duties with      % disciplinary pay reduction\* effective      [ ]  Disciplinary transfer – same pay band with      % disciplinary pay reduction\* effective       * New Role Title:
* New Position #:
* New Location:

[ ]  Demotion to lower pay band with      % disciplinary pay reduction\* effective       * New Role Title:
* New Position #:
* New Location:

*\*Note: A salary reduction of at least 5% is required. Also requires HR approval.* |
| **[ ]  Termination*** Effective Date:
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| **Section Four** |
| **Issued By** *(Last Name, First, Middle Initial)*      | **Issued By Working Title**       |
| **Issued By Signature** | **Date** |

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| **Section Five** |
| **Notice to employee**It is expected that the situation described above will be corrected immediately in accordance with the Standards of Conduct for employees and/or the performance measures outlined in your Employee Work Profile. **A Written Notice Form may be used in place of a Notice of Improvement Needed Form and may affect your overall performance rating.** In the event that this situation is not corrected, or another offense occurs, you may be subject to further disciplinary action, up to and including termination, as outlined in the JMU's Standards of Conduct policy, <http://www.jmu.edu/JMUpolicy/1317.shtml>. **If you wish to appeal this disciplinary action, you may do so under the provisions of the Employee Grievance Procedure within 30 calendar days of your receipt of this Written Notice**. For more information about the Grievance Procedure, contact an HR Consultant, (540) 568-6165, or DHRM’s Office of Employment Dispute Resolution at 1-888-232-3842, or <http://www.dhrm.virginia.gov/employmentdisputeresolution.html>. Non-probationary Campus Police Officers may seek an alternative process to EDR’s Grievance Procedure to address complaints within their department. Campus Police Officers may contact an HR Consultant for assistance with either process.**Your signature only acknowledges receipt of the notice and notes the date of receipt.** Your signature does not imply agreement or disagreement with the notice itself. If you refuse to sign, someone in a supervisory position within the agency will be asked to initial the form indicating that you received a copy of the form and date of receipt. |
| **Employee Signature** | **Date** |
| **[ ]** Employee refused to sign/unavailable to sign | **Witness Initials** | **Date** |

**Written Notice Offense Codes**

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| 01 | Attendance/excessive tardiness |
| 02 | Leaving work without permission |
| 03 | Failure to report without notice |
| 04 | 3 days absent without authorization |
| 11 | Unsatisfactory Performance |
| 12 | Uniform violation/personal grooming |
| 13 | Failure to follow instructions and/or policy |
| 14 | Safety rule violation |
| 31 | Violation of Policy 1.05, Alcohol and Other Drugs |
| 33 | Violation of Policy 2.05, Equal Employment Opportunity |
| 35 | Abuse of state time |
| 36 | Obscene or abusive language |
| 37 | Disruptive behavior |
| 38 | Conviction of moving traffic violation while using a state vehicle |
| 39 | Violation of Policy 2.35, Civility in the Workplace |
| 51 | Unauthorized use of State property or records |
| 52 | Computer/Internet misuse |
| 53 | Failure to report misdemeanor (if required) |
| 54 | HIPAA violation |
| 55 | Fraternization with patient/inmate/client |
| 56 | Insubordination |
| 57 | Refusal to work overtime as required |
| 71 | Sleeping during work hours |
| 72 | Theft |
| 73 | Threats or Coercion |
| 74 | Falsifying records |
| 75 | Gambling |
| 76 | Criminal conviction |
| 77 | Damaging state property or records |
| 78 | Interference with state operations |
| 79 | Unlawful weapons possession |
| 81 | Patient/inmate/client abuse |
| 99 | Other (describe) |