Written Warning - Copy for Personnel File

Employee Name:				
Job Title:			- W- 100 - W 100	
Meeting Date:				
People Present:				(title)
			,	(title)
			,	(title)
	[List name(s) as n			
Summary of Areas	of Concern:			
[List major/key area	s, including date(s)	as applicable]		
Expectations:				
[Describe expectation timeline/deadline for			, include remedial steps and/o	<u>r</u>
Further Action:				
	d Procedures. We w	ant [Employee Nam	plinary action pursuant to our <u>e</u>] to succeed. We hope this ha	as
I provided a copy of	this written warning	g to [Employee Nan	<u>1e]</u> on [<u>date</u>].	
Name:				
Title:				
Witness, if applica	ble]			
Name:	_	Date:		

Verbal Warning - Copy for Personnel File

Employee Name:	
Job Title:	
Meeting Date:	
People Present:	,
	,(title
	[List name(s) as needed]
Summary of Areas	of Concern:
[List major/key areas	
Summary of Conve	rsation:
[Recap conversation	: describe expectation, timeline/deadline for improvement, etc.]
Plan/Outcome:	
	entinues, that could lead to further disciplinary action. I explained to lat we want [Employee Name] to succeed. We hope this conversation will our expectations.
I reviewed the above	expectations with [Employee Name] on, 2022.
Name:	Date:

IOWA STATE UNIVERSITY Extension and Outreach

RECOMMENDATIONS FOR MAINTAINING PERSONNEL FILES (COUNTY PAID EMPLOYEES)

County Employees

Official Personnel File

Advertised Job Announcement Resume / Application Materials Letter of Intent / Contract Letter

W-4's (Copy)

Hire Documentation

Current Position Description

Performance Appraisals

Discipline Letters

Recognition/Comment

Recognition/Commendations

Resignation Letter

Retirement Documents

Supervisor File

Performance Documentation

Payroll File Timesheets

Leave Requests

W-4's (Original)

* Should be in separate file and separate location from all personnel files.

Medical/Confidential File*

Worker's Comp Medical Leave

Health Insurance Signup/Documentation

Life Insurance Signup/Documentation Any other benefits/insurance forms **Benefits File**

FMLA

Doctor notes, etc.

^{**} All 1-9 Forms for all employees should be held in one file separate from all personnel files.