



INACTIVATION

TO: _____

TITLE: _____

EMPLOYEE # _____

FROM: _____

TITLE: _____

DEPT: _____

SUBJECT: **INACTIVATION OF DISCIPLINARY ACTION**

TODAY'S DATE: _____

You have successfully corrected the problem that caused us to issue the following discipline(s):

- (select) ☐ Verbal Warning
- ☐ Written Warning
- ☐ Suspension
- ☐ Pay Reduction
- ☐ Demotion

Date(s) of discipline(s) _____

We appreciate the efforts you have made to improve your performance.

Please recognize that the problem will have some impact on your performance review for the affected rating period. We are obligated to accurately report your performance for the entire period.

The disciplinary action is being removed from your active personnel file and will be placed in the inactive file. If you have no further disciplinary problems, it will remain inactive. If your future behavior leads to any discipline, whether of a similar or different nature, inactive disciplinary items can be considered in determining our next course of action.

It is to your benefit to follow all the County rules and department policies and conduct yourself responsibly.

Fill out the form. Print two (2) copies. Give one to the employee.
File one in your department files. Click red Submit button ►
to email the form to Human Resources.

SUBMIT