



Catholic Diocese of Columbus

PROGRESSIVE CORRECTIVE ACTION REPORT

The following action was taken on this date and is to be made a part of the employee's personnel record:

Employee's Full Name: _____ Date: _____

Department: _____

Specific Behaviors Leading To This Action: _____

<input type="checkbox"/>	Verbal Notice
<input type="checkbox"/>	Written Notice
<input type="checkbox"/>	Suspension
<input type="checkbox"/>	Discharge

Employee Statement: _____

Supervisor

Employee

Director
Human Resources

Chancellor

In accordance with the Personnel Policy Code, every employee has the right to file a written complaint within 10 working days of this corrective action.