

ACTION PLAN FORM

Employee Name: _____ Date Observed: _____ Date Coached: _____

Reason for Action:

- Violation of Company Policy
- Performance
- Behavior
- Misconduct

Action Taken:

- Written Warning
- Suspension _____ days

Suspension Dates: _____

Performance Standard(s) that team member does well:

STANDARDS

- Exceeds Guests Expectations
- Supports "Coaching for Success" Plan
- Enhances Employee Success
- Effectively Communicates
- Committed to Growth
- Effective Team Member
- Personal Skills

CORE VALUES

- Excellence
- Quality
- Relationship
- Integrity
- Enthusiasm

Specific observed performance or behavior and the impact it caused the organization.

Team member discussion on ways to keep the circumstances from happening again:

Prior Coaching(s) (minimum 6 mo.)
(Verbal, Written, or Action Plans)

Date

Reason

Immediate and sustained improvement in performance must be made or further discipline may result up to and including termination.

Employee Comments or (other comments)

Manager signature

Employee signature

General Manager signature