|  |  |  |
| --- | --- | --- |
| **EMPLOYEE NAME:** | **RANK:** | **REASON FOR ACTION:**  RECOGNITION OF EXPLEMENTARY ACTION  NOTICE OF DIRECTION Policy  DOCUMENTED COUNSELING Violation |
| **SUPERVISOR NAME:** | **RANK:** |
| *Proper recognition of the actions and counseling efforts of subordinates is the responsibility of supervisors. Recognition of any explementary action is important to an employee’s career development by recognizing their individual success and also to the department by encouraging similar behaviors. Counseling sessions are meant to address performance concerns by clearly identifying and informing an employee of the performance or behavioral expectations. Information documented on this form is meant to be recognitive, positive, and/or corrective not directly punitive or disciplinary. This form serves as formal interdepartmental documentation which will be considered during times of Performance Evaluations, and when necessary Human Resources action.* | | |

Controlled by Policy 1.1.5

|  |
| --- |
| **SUPERVISOR STATEMENT OF REASON(S) PROMPTING INTERDEPARTMENTAL DOCUMENTATION:** |
|  |
| **EMPLOYEE COMMENTS:** (optional) |
|  |

I acknowledge that on the above date I was provided this Interdepartmental Tracking Form and met with the Supervisor as co-signed. During this meeting, we discussed the Supervisor Statement of Reason(s) prompting the documentation as noted above.  
  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 Employee Supervisor