



DISCIPLINARY NOTICE

DATE: Date Given to the Employee
TO: Employee's Name, Title, and Employee ID #
FROM: Supervisor's Name, Title, and Employee ID#
SUBJECT: Involuntary Demotion

This notice is to inform you that you are being demoted from your position of (position title) to (position title) effective (date) as a result of your actions outlined below. Your new rate of pay will be (pay rate) and your performance review date will change to (date of demotion).

Reason for Involuntary Demotion

Describe the incident (or re-occurring performance issues) as detailed as possible, including the time, place, date(s) of occurrence and persons present, if applicable. Also include a statement about how the incident impacted the department, co-workers, and the City of Denton. When possible, site specific policy violations (policy 109.01 has performance and behavioral examples you can site).

Example:

On January 8, 20XX, you were given a written reprimand for job performance because each of your last three bi-weekly fiscal reports were more than three (3) weeks late and contained numerous errors.

Since the written reprimand, you failed to submit the written proposal for the grant fund tracking system by March 1, 20XX, which you knew four (4) weeks ago was the deadline for the project. I spoke with you about the missed deadline on March 5, 20XX, but you did not report any extenuating circumstances that may have caused you to miss the deadline, nor did you suggest you may be delayed when I checked in with you on the status of the project on February 21, 20XX.

You also have failed to provide any training whatsoever to Jim Trainee 1 and Jill Trainee 2 regarding the budget journal entry procedures. As an Accounting Tech II, training staff is an essential function listed in your job description and was discussed on our quarterly meeting on February 1, 20XX. I followed up with you on March 5, 20XX and April 9, 20XX, to discuss the need for the training. Your failure to provide the training has required me to work extensively with each of these employees at the end of April, correcting their mistakes and showing them the correct way to make journal entries. Such mistakes, if not caught, can ultimately affect our budget and end-of-year reporting. Your continued missed deadlines and your lack of training after numerous requests are in violation of the City's Disciplinary Action policy (#109.01, sections A. 1 and 2).

Meeting deadlines is important in any position, but in Accounting, it is extremely important as many of the deadlines affect our quarterly (and end of year) reporting requirements. Training staff is also critical to ensure accuracy of information. Credibility of information in Accounting is extremely important and inaccurate information affects this credibility. As a result of your lack of performance in these two critical areas, I have lost confidence in your ability to be an Accounting Tech II.

OUR CORE VALUES

Integrity • Fiscal Responsibility • Transparency • Outstanding Customer Service

Additional disciplinary actions, up to and including dismissal, may follow if you fail to meet the performance expectations required in the (new title) position.

Appeal Rights: You may have the right to appeal this involuntary demotion in accordance with City of Denton Policy, Section 109.03. Accordingly, you must submit your appeal in writing to the Human Resources Department within ten (10) days of receiving notification of the action taken.

Supervisor's Signature

Date

I understand that the City of Denton is an "at-will" employer, meaning that my employment has no specified term and that the employment relationship may be terminated any time at the will of either party on notice to the other. I also realize that the City of Denton is opting to provide me with corrective action measures, and can terminate such corrective measures at any time, solely at its own discretion, and that the use of progressive discipline will not change my at-will employment status.

I have received a copy of this notification. It has been discussed with me and I have been advised to take time to read it before I sign it. My signature acknowledges receipt of the notification, but not necessarily agreement with the statements made in it. My signature also acknowledges the appeal process explained to me and that I have been provided a copy of the Appeals policy (No. 109.03).

Employee Signature

Date

If employee refuses to sign:

Witness

Date

Employee Comments:

The employee may use the following space (or add extra pages) to write any comments to the supervisor's statements above. The employee's comments will be filed with this memorandum in the employee's personnel file.

To be completed by supervisor:

HBU	
Department	
Division	
Reason for Disciplinary Action	<input type="radio"/> Safety Violation/Accident <input type="radio"/> Attendance/Tardiness <input type="radio"/> Performance Deficiency <input type="radio"/> Behavior/Conduct Infraction <input type="radio"/> Other Policy Violation
Previous performance review date and rating	
Has the employee had a previous managed action plan (MAP) or disciplinary action that has been filed in Human Resources?	<input type="radio"/> No <input type="radio"/> Yes
If yes, complete the information below:	
Disciplinary Action Type/MAP	Date/Brief Description
<input type="radio"/> Warning	
<input type="radio"/> Reprimand	
<input type="radio"/> Decision-Making Day	
<input type="radio"/> Suspension	
<input type="radio"/> Demotion	
<input type="radio"/> Managed Action Plan (MAP)	