Educational Memorandum (Record of Counseling)

DATE: (Date)

TO: (Name of Employee Receiving Educational Memorandum)

FROM: (Name of Supervisor)

SUBJECT: Educational Memorandum (include Policy Violation Number and Title)

A short informational memo describing the situation or behavior and what needs to be addressed and / or changed. Refer to any City of Fairfield Administrative Policies that were violated.

Employee will sign memo acknowledging the conversation.

The original signed memo will be filed in the Department File and a copy given to the employee.

_ _ (Supervisor's Initials)

_____ (Employee's Signature)
[Print Employees Name Here]

_____ (Date)