KU THE UNIVERSITY OF KANSAS
Human Resource Management

REQUEST FOR DISCIPLINARY ACTION

Disciplinary action against University Support Staff employees must meet the requirements set forth in the University Personnel Regulations. This form is to be used by a University Supervisor or Administrator to report cause for recommending disciplinary action to the Director of Human Resource Management or designee. Please submit this form to your appropriate Dean, Director, or Chairperson for review and transmittal to Human Resource Management, Carruth-O'Leary Hall. For assistance or information, please call 864-4946.

Name of Employee _____ Department _____

Home Address _____
(Street) **(City)** **(Zip)**

Job Status: (Circle one) Permanent Probationary Temporary

Regular Work Schedule: **M T W R F SA Su (Circle days at work)**

Shift Begins: _____ Shift Ends _____

Date Employed: _____ Employee ID _____ POS#: _____

Position Title: _____ Supervisor: _____

Reasons for recommending disciplinary action (describe in detail, including dates and places):

Action Recommended: Suspension ☐ Dismissal ☐ Demotion ☐

Signed: _____ Title: _____

Department: _____ Reviewed by: _____
(Dean, Director, Chairperson)

Date: _____ Date: _____

Form P-14