

NWTL REQUEST FOR DISCIPLINARY ACTION

Please complete this form and attach any additional information or incident reports (IR) as required.

TO BE COMPLETED BY MANAGER			
Name of Staff			
Company			
Position Title			
Location			
PLEASE REFE	R TO COI	DE OF DISCIPLINE BEFOR	E FILLING THIS SECTION IN
Offense Committed			
Date of Incident			
Place of incident			
Brief Description of the Incident			
*Attach All IR			
Action Requested	Written Warning Suspension (plus Investigation)		Suspension Termination
Note: Managers are authorised to send staff immediately to HR office in the following serious incidences:			
			on duty, Shortages of K200 and above
Authorizing Signatures		SIGN AND DATE	
Requested By		0.0	
Authorizing Official			
Attached IR	Yes	No	
		HR OFFICE USE ONLY	
Suspension Recommended	YES	NO	
Period of Suspension			
Actioned by			