

# No Call, No Show Facility Write-Up Template

Employee Name		Organization Name	
Employee ID		Department	
Position		Supervisor	
Date of Incident		Date of Write-Up	

**Description of Violation:**

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**Impacts to the Organization:**

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**Employee Statement (if any):**

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**Attendance Record (for rolling year):**

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**Corrective Measures to Be Taken:**

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I acknowledge that I have received and reviewed this write-up regarding a no call, no show absence on \_\_\_\_\_. I understand the expectations as stated in the attendance policy attached in Appendix A and will take responsibility for the corrective measures outlined above. I understand and have reviewed the consequences of a repeat violation if I fail to adhere to the policy expectations and corrective plan.

Employee Signature \_\_\_\_\_ Date/Time \_\_\_\_\_  
Supervisor Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

# Appendix A

## Attendance Policy : No Call, No Show Occurrences

No Call, No Show Occurrences <i>(Within rolling 12-month period where (none) are allowable)</i>	Documented Follow-Up
1	Final Warning (with HR approval)
2	Termination (with HR approval)