

# Employee Termination Documentation

## Disciplinary Warning/Action Log

Employee's Name: \_\_\_\_\_ Position: \_\_\_\_\_

**Problem #1 With Employee** (include dates and description):

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Date Disciplinary Warning given: \_\_\_\_\_ Date Disciplinary Action taken: \_\_\_\_\_

**The Warning Given or Action Taken:**

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Signature of Doctor: \_\_\_\_\_ Date of INITIAL Entry: \_\_\_\_\_

**Repeated Incidents of this problem.** Note date of incident, whether warned (W) or disciplined (D).

(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D  
(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D

**Problem #2 With Employee** (include dates and description):

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Date Disciplinary Warning given: \_\_\_\_\_ Date Disciplinary Action taken: \_\_\_\_\_

**The Warning Given or Action Taken:**

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Signature of Doctor: \_\_\_\_\_ Date of INITIAL Entry: \_\_\_\_\_

**Repeated Incidents of this problem.** Note date of incident, whether warned (W) or disciplined (D).

(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D  
(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D

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## Disciplinary Warning/Action Log

Employee's Name: \_\_\_\_\_ Position: \_\_\_\_\_

**Problem #\_\_\_ With Employee** (include dates and description):

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Date Disciplinary Warning given: \_\_\_\_\_ Date Disciplinary Action taken: \_\_\_\_\_

**The Warning Given or Action Taken:**

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Signature of Doctor: \_\_\_\_\_ Date of INITIAL Entry: \_\_\_\_\_

**Repeated Incidents of this problem.** Note date of incident, whether warned (W) or disciplined (D).

(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D  
(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D

**Problem #\_\_\_ With Employee** (include dates and description):

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Date Disciplinary Warning given: \_\_\_\_\_ Date Disciplinary Action taken: \_\_\_\_\_

**The Warning Given or Action Taken:**

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Signature of Doctor: \_\_\_\_\_ Date of INITIAL Entry: \_\_\_\_\_

**Repeated Incidents of this problem.** Note date of incident, whether warned (W) or disciplined (D).

(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D  
(DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D    (DATE)\_\_\_\_\_ ☐W ☐D

Make extra copies of this page if needed.

# Employee Termination Documentation

## Employee Exit Interview

Practice Name: \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Name: \_\_\_\_\_ Position: \_\_\_\_\_

Date Hired: \_\_\_\_\_ Date of Last Day of Employment: \_\_\_\_\_

### Supervisor's Checklist for Last Day of Employment:

- ☐ Office Key(s) Returned
- ☐ Pension & Profit Share Form filed for Termination
- ☐ Books/Tapes/Office Property Returned
- ☐ Final Check Received by employee *within 3 days* of last day of employment
- ☐ Disbursement amount on final check is correct
- ☐ Other \_\_\_\_\_

Forwarding Address (for further communications):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have completed the above checklist and find that everything is in order.

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Doctor/Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_