

COUNSELING REPORT

STATEMENT OF PURPOSE:

A COUNSELING REPORT IS FOR THE PURPOSE OF ADVISING YOU OF A DEFICIENCY IN YOUR PERFORMANCE AS AN EMPLOYEE OF _____ COUNTY HOSPITAL. AS A PART OF YOUR EMPLOYMENT RECORD, THE COUNSELING REPORT IS WRITTEN FAIRLY, OPEN-MINDEDLY AND WITHOUT PREJUDICE. ALL CIRCUMSTANCES INVOLVED WILL BE CONSIDERED WHEN PREPARING THIS REPORT.

EMPLOYEE'S NAME: _____

COUNSELOR: _____

WITNESS: _____

DATE: _____

PURPOSE OF COUNSELING REPORT:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> ABSENTEEISM | <input type="checkbox"/> MISUSE OF FACILITY PROPERTY AND TIME |
| <input type="checkbox"/> APPEARANCE | <input type="checkbox"/> NURSING CARE |
| <input type="checkbox"/> TARDINESS | <input type="checkbox"/> INTERPERSONAL RELATIONSHIPS |

*COUNSELOR'S COMMENTS: _____

EMPLOYEE'S COMMENTS: _____

EMPLOYEE SIGNATURE

COUNSELOR SIGNATURE

ADMINISTRATOR'S SIGNATURE

*Use additional sheets if necessary