

# Hale Fire Protection District



## Disciplinary Action Form

**Date** \_\_\_\_\_

**Firefighter/EMR Name** \_\_\_\_\_

**Title (if applicable)** \_\_\_\_\_

### RESIGNATION

Resigned With Notice \_\_\_\_\_ Last Day Worked \_\_\_\_\_

Resigned Without Notice \_\_\_\_\_ Last Day Worked \_\_\_\_\_

Comments:

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### DISCIPLINARY ACTION

Summary of Incident:

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(If more space is needed, use the back of this form.)

### ACTION TAKEN

Oral Reprimand	_____		
Written Reprimand	_____		
Suspension	_____	Number of Days	_____
		Return to Service (Date)	_____
Termination	_____		

**Chief Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Firefighter/EMR Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Board Notified	Y / N	Date	_____
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