

NOTICE OF DISCIPLINARY LAYOFF OR DISCHARGE

Disciplinary Layoff       Discharge

To Union Representative: \_\_\_\_\_

**Concerning:**

Name: \_\_\_\_\_ Dept.: \_\_\_\_\_

Date Effective: \_\_\_\_\_ Time: \_\_\_\_\_

Signed: \_\_\_\_\_ Date Issued: \_\_\_\_\_

cc: Human Resources Department (original)  
Union President  
Chief Steward (if applicable)  
Steward  
Department Head  
Employee