**DATE:** *(Date of letter must be the same date that the employee receives the letter.)*

**TO:** *<FIRST AND LAST NAME - Include middle/nickname if necessary.>*

**FROM:** *<SUPERVISOR’S FULL NAME>*

*<DEPARTMENT NAME>*

**RE:** Disciplinary Decision of Suspension without Pay

**Purpose of Notification**

This letter is formal notification of my decision that effective ***< insert effective date>*** you will be suspended without pay for ***<insert number of days suspended>*** days, < ***insert date 24 hours after effective date***> through <***insert five working days from the first day of suspension***> due to your <***unacceptable personal conduct, unsatisfactory job performance, or grossly inefficient job performance*** > related to < ***insert short statement of work or actions at issue*** >.

**Incident(s) Resulting in the Pre-Disciplinary Conference**

<Detail what occurred, and include as applicable any information already provided by the employee to explain the incident. When possible, note specific and relevant performance expectations that were not met and/or explain what is unacceptable about the employee’s work or actions. Include any specific consequences/impact of the action or inaction (e.g., resulted in an overpayment of $550, resulted in 10 students not receiving their checks on time, resulted in significant additional work for your co-workers, etc.).>

1. <On <DATE> you and I met regarding <…> and I instructed you to <…>. On <DATE>, I sent you a follow-up email summarizing this conversation.>

2. <On <DATE> you attended a workshop on <…>…>

3. <On <DATE> you received a Written Warning for Unacceptable Personal Conduct, specifically due to <…>…>

**Additional Information Provided at Pre-Disciplinary Conference**

On (***DATE OF PDC***) you attended a pre-disciplinary conference with me to discuss this issue. Also, present at this Conference was <***NAME/TITLE OF THOSE IN ATTENDANCE***>.

1. You were given the opportunity to respond to the allegations in this letter. In the conference, you ***< insert detailed information provided by the employee during the PDC>***.

**Disciplinary Decision**

Based on all information disclosed at the conference, you will be suspended without pay for <***insert number of days suspended***> days.

You cannot use available leave during this suspension to cover your absence, and you are not allowed to be at the work place or to perform work during this time period. You are expected to return to work <***insert return to work date. Should be 24 hours after the last day of suspension***> as the official date of your return.

Effective immediately, you are to surrender your Aggie One card. In addition, your access to university email and other systems will be revolved during your suspension. These items will be returned to you upon your return on ***<insert return to work date>*** and your access to university email and other systems will be restored.

**Required Corrections and Timeline for Corrections**

***<Specifically detail required corrective actions or new expectations. Indicate actions that will be taken in order to support the employee in making corrections to his/her performance (e.g., meeting, shadowing, training etc.). Sufficient correction of performance issues generally needs to occur within 30-60 calendar days of receiving the written warning. Conduct corrections are expected to be immediate. >***

When you return to work, you will be expected to:

**Consequences of Failure to Make Required Corrections**

If you fail to make and sustain these corrections, I will consider further disciplinary action, up to and including dismissal.

**Active Lifespan of this Disciplinary Action**

This disciplinary action has been issued pursuant to the state’s SHRA Disciplinary Action Policy. This action will become inactive if:

1. 18 months have elapsed since the date this disciplinary action was issued and you have not received another disciplinary action, or
2. On your next annual performance appraisal, you receive at least a “Meeting Expectations” on your final overall rating and receive at least a “Meeting Expectations” rating for the goal that pertains to this incident, which covers integrity, or
3. Management chooses to inactivate this disciplinary action in less than 18 months.

If you receive another disciplinary action while this action is still active, then this action will remain active for the duration of the subsequent disciplinary action, provided that the entire active period for this action does not exceed 36 months. (The actions do not have to be related in content.)

Inactivation of this disciplinary action shall not be interpreted to mean that the pay you lost due to the suspension will be restored.

**Records Retention & Access to Records**

Retention of disciplinary actions and related documents is governed by the University’s General Records Retention and Disposition Schedule. In addition, Article 7 of Chapter 126 of the North Carolina General Statutes provides that the date and type of each suspension without pay action is public information and must be released if requested.

If you are the selected candidate for another State position, the hiring supervisor may be allowed to review portions of your University Personnel File as part of the reference checking process. This may include, but is not necessarily limited to, performance management documents, the date and type of each previously-issued disciplinary suspension or demotion, and dismissal for cause documents from previous University employment. The hiring supervisor may factor this information into the final hiring decision.

**Appeal Rights**

You have the right to appeal this disciplinary action under the University’s SHRA Employee Grievance Policy (“Policy”). To be eligible, you must submit your Grievance Filing Form to <***Name, Title, and phone number*** *>* in Human Resources *or <****email address****>* within 15 calendar days of the date that you received this disciplinary action. A copy of the Policy is attached. For your convenience, you also may obtain a copy of the Policy through <https://hub.ncat.edu/_files/administrative/shra_grievance_policy.pdf>. If you have questions about your appeal rights, please contact <**Name of HR representative**>.

**Supervisor’s Signature**

Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employee’s Acknowledgement**

I acknowledge that I have received this Notice. I understand that my signature below does not necessarily imply agreement with this action or the incident(s) identified within this Notice.

Employee’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**cc:**  *Management Chain of Command*

***Director of Employee Relations***

***File***