DARLINGTON COUNTY SCHOOL DISTRICT

Office of Human Resources · 120 East Smith Avenue · Darlington, SC 29532 · (843) 398-5100

CLASSIFIED EMPLOYEE CAUTION FORM

Employee Name:	**Location:**
Position:	**Employee ID #:**
Supervisor:	**Date:**

REPORT OF BEHAVIOR/CONCERN

Behavior/Concern	☐ Tardiness
	☐ Failure to follow absence reporting procedures
	☐ Failure to follow administrative directive
	☐ Failure to fulfill assignments/job duties
	☐ Failure to adhere to safe practice policies
	  ☐ Speeding or reckless/unsafe driving
	  ☐ Unsafe use of equipment
	  ☐ Health violations
	  ☐ Other:_____
	☐ Inappropriate communication
	  ☐ With colleague(s)
	  ☐ With parent(s)
	  ☐ With student(s)
	  ☐ With supervisor
	  ☐ Other:_____
	☐ Failure to maintain a valid license
	☐ Failure to maintain a physical on file
	☐ Other:_____

Brief Summary of Incident	
Date(s) of Incident(s)	
Directives/ Recommendations	Recommendations: ☐ Improvement Plan Required ☐ Improvement Plan Not Required

RECORD OF CAUTIONS	**Caution 1 Date:**_____	**Caution 2 Date:**_____	**Caution 3 Date:**_____

Signature of Employee_____ Date: _____

Signature of Director/Supervisor_____ Date: _____

Signature of Assistant Superintendent or District Supervisor _____ Date: _____

***Attach a signed personnel file cover sheet

revised 06/06/22