

UAL-RRA STEWARD NOTE FORM



Employee Name Last: _____ First: _____

Employee File Number: _____ Phone: _____

Email: _____ Shift: _____ RDO: _____

Supervisor(s) _____

Steward(s) _____

Date: _____ Time: **Start** _____ **End** _____

Region Assigned (State Agt lives): _____ Committeeperson: _____

Issue:

Attendance Performance: _____ **Investigation:** _____ **Other:** _____

Discipline Issued:

Coaching & Counseling _____ **Documented Verbal Warning** _____ **Written Warning** _____

Termination Warning _____ **Removed from Service** _____ **Termination IRM** _____

Lead Proccession:

Coaching/Counseling _____ **Targeted Training** _____ **Written Warning** _____ **Return to Basic Classification** _____

Notes: