

## Counseling Form

TRAINING  
CONSULTING

Counseling Date: 23-1-24

Name of Employee: <u>Ateal Khan</u>	Job Title: <u>AS</u>
Supervisor Name: <u>Sanaullah Khan</u>	Supervisor Title: <u>UCOO</u>
Job Location:	Incident Date/Performance Period:

This counseling session is being held because of the following:

- Attendance/Absenteeism     Insubordination     Poor Performance  
 Non Serious and Casual Attitude     Tardiness and Late Comer     Weak Supervision Skills  
 Violation of leave policy     Unprofessional Attitude     Neglect of Duty  
 Other (Specify) \_\_\_\_\_

Nature of Incident: Counseling session against our  
UCOO Sanaullah Khan

Corrective Action: we are Thnx full to PIC  
Staff that they take action of  
my Application against our UCOO Sanaullah Khan

Employee Comments: its a good method to solve  
the problems

Counseling is intended to be a constructive process to assist you to identify, discuss and remedy aspects of your job performance or conduct that need improvement. As noted above, these aspects have been discussed with you and require your immediate attention.

Failure to correct your conduct/performance may lead to further administrative action including discipline.

[Signature]  
Signature of Employee / Date  
Date

[Signature]  
Signature of Supervisor /

Original to: Employee  
Copies to: Employee's Official Personnel File in Human Resources  
Immediate Supervisor