

Counseling Form



Counseling Date: 23/11/2024

Name of Employee: <u>Shahnaiz</u>	Job Title: <u>C.H.W</u>
Supervisor Name: <u>Tanzeel Ahmed</u>	Supervisor Title: <u>A.S</u>
Job Location: <u>Samali</u>	Incident Date/Performance Period: <u>23/11/2024</u>

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 HC Samali

Corrective Action: _____

Employee Comments: میرا مشورہ ہے کہ اس طرح کی (counseling) سیشن

دیجے جاسیے تاکہ آئندہ ایسا کوئی مسئلہ نہ ہو۔

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.

Shahnaiz

Signature of Employee / Date

Date

Tanzeel Ahmed

Signature of Supervisor /

Original to: Employee

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