

Counseling Form

Counseling Date: 2-1-2023

Name of Employee: <u>Isaas M. Paul</u>	Job Title: <u>UCPO Ichan</u>
Supervisor Name: <u>Dr. Laiya</u>	Supervisor Title: <u>IO</u>
Job Location: <u>Thatta</u>	Incident Date/Performance Period: <u>July - Dec 2022</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:

Poor Performances
Weak supervision skills and Non Serious
and casual attitude

Corrective

Action: After motivational and encouraging
session, he is committed to do hard work
and give 100% compliance in future.

Employee Comments:

I agree and I will improve
my performance in future with full
dedication and commitment.

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.

Laiqya
2/1/2023
Signature of Supervisor / Date

Signature of Employee / Date  02/01/2023

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