

**NOTABLE INCIDENT RECORD**

This form can be used to document notable incidents of an employee’s performance, either positive or negative. The completed form should be retained by the supervisor as a point of reference for performance-related discussions with the employee (such as the Annual Planning and Performance Review process).

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| --- | --- |
| Date incident occurred |  |
| Employee’s name |  |
| Supervisor’s name |  |
| Description of what occurred |  |
| Person(s) who reported or witnessed incident |  |
| Location of incident |  |
| Date incident discussed with employee |  |
| Suggestions for avoidance of similar incidents in future *(if the incident was of a negative nature)* |  |

**Signature of Supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_