BALL STATE UNIVERSITY
Service Personnel
Disciplinary Suspension Report

Date: _____ BSU ID No.: _____

To: _____ Title: _____

DISCIPLINARY SUSPENSION: Part-Time: _____ Full-Time: _____

You are hereby suspended without pay for _____ workdays effective (date) _____ (time) _____ until (date) _____ (time) _____.

REASON FOR SUSPENSION:

You have been issued this **disciplinary suspension** for violation of University rule or regulation number _____ which reads as follows:

The violation occurred on (date) _____ at (time) _____ at the following location _____ _____.

FACTS RELATED TO VIOLATION: (Be specific regarding circumstances involved)

WHAT ACTION HAS BEEN TAKEN:

SUPERVISOR'S RECOMMENDATION:

Future violations of University rules or regulations will result in further disciplinary action, up to and including discharge.

_____
Supervisor's Signature

_____
Title

Distribution:
1 copy - Employee
1 copy – Employee Relations
1 copy - Supervisor

HR-51; 3/2012; 09/2018