

LAKE COUNTY SCHOOL DISTRICT R-1

Director/Supervisor's Report on Violation of District Rules

Employee Name: _____

Department: _____ Date: _____

Nature of Offense: _____

Rule Violation: _____

HAS EMPLOYEE BEEN WARNED
BEFORE FOR SIMILAR OFFENSE: Yes _____ No _____

When: _____

By Whom: _____

Signature of Supervisor

Approved: August, 2005