

# DOCUMENTING BEHAVIOR WORKSHEET 1

This worksheet can help you document performance problems with the employees you supervise. Go through the list and place an "X" next to each characteristic you have noticed in an employee. Particularly look for changes in that person's behavior. Next, for each behavior that you marked, indicate what you did about it (e.g., "I ignored it," "I spoke to employee about it," "I disciplined employee," "I removed employee from the situation," etc.)

Employee \_\_\_\_\_ Supervisor \_\_\_\_\_ Date \_\_\_\_\_

## 1. ABSENTEEISM

- \_\_\_\_\_ Multiple instances of unauthorized leave
- \_\_\_\_\_ Excessive sick leave
- \_\_\_\_\_ Frequent Monday and/or Friday absences
- \_\_\_\_\_ Repeated absences, particularly if they follow a pattern
- \_\_\_\_\_ Excessive tardiness, especially on Monday mornings or in returning from lunch
- \_\_\_\_\_ Leaving work early
- \_\_\_\_\_ Peculiar and increasingly improbable excuses for absences
- \_\_\_\_\_ Higher absenteeism rate than other employees for colds, flu, gastritis, etc.
- \_\_\_\_\_ Frequent unscheduled short-term absences (with or without medical reasons)

## 2. 'ON THE JOB' ABSENCES

- \_\_\_\_\_ Frequent absences from work station
- \_\_\_\_\_ Frequent trips to water fountain or rest room
- \_\_\_\_\_ Long breaks
- \_\_\_\_\_ Physical illness on the job

## 3. HIGH ACCIDENT RATE (and more accident claims)

- \_\_\_\_\_ Accidents on the job
- \_\_\_\_\_ Accidents off the job (but affecting job performance and attendance)

## 4. DIFFICULTY IN CONCENTRATION/CONFUSION

- \_\_\_\_\_ Mistakes due to inattention or poor judgment
- \_\_\_\_\_ Jobs take more time than is reasonably expected
- \_\_\_\_\_ Difficulty in recalling instructions, details.
- \_\_\_\_\_ Increasing difficulty in handling complex assignment
- \_\_\_\_\_ Difficulty in recalling own mistakes

## 5. INCONSISTENT WORK PATTERNS

- \_\_\_\_\_ Alternating periods of high and low productivity

## 6. REPORTING TO WORK

- \_\_\_\_\_ Coming to or returning to work in an obviously abnormal condition.

## 7. GENERALLY LOWERED JOB EFFICIENCY

- \_\_\_\_\_ Missed deadlines
- \_\_\_\_\_ Mistakes due to inattention or poor judgment
- \_\_\_\_\_ Wasting materials Making
- \_\_\_\_\_ bad decisions Complaints
- \_\_\_\_\_ from customers
- \_\_\_\_\_ Improbable excuses for poor job performance

## 8. POOR EMPLOYEE RELATIONSHIPS ON THE JOB

- \_\_\_\_\_ Over reaction to real or imagined criticism
- \_\_\_\_\_ Mood swings Unreasonable
- \_\_\_\_\_ resentments Borrows money from
- \_\_\_\_\_ co-workers Complaints from co-
- \_\_\_\_\_ workers Avoidance of co-workers
- \_\_\_\_\_

# DOCUMENTING BEHAVIOR WORKSHEET 2

JOB PERFORMANCE OBSERVATIONS: Indicate the date(s), time(s) and condition(s) you have observed and document the specific behaviors that indicate declining job performance. **THESE NOTES MUST REMAIN CONFIDENTIAL.**

## PERFORMANCE/SAFETY

### **Equipment breakdown**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Significant increase in errors**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Requires increased supervision**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Carelessness**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Endangering personal safety**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Endangering the safety of other employees**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Increased accidents or near misses**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

## ATTENDANCE

### **Increased tardiness**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Increased absenteeism**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Increased use of sick leave**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

### **Unaccounted for periods of absences from job while on duty**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

## BEHAVIOR

### **Theft**

Dates and times \_\_\_\_\_  
Observation \_\_\_\_\_

## BEHAVIOR (cont.)

**Poor attitude**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Complaints from customers**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Confrontations with co-workers**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Refusal to take drug test**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Emotional outbursts**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Difficulty with authority**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Lying to cover mistakes**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Possession or distribution of alcohol or drugs**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

**Intoxicated behavior**

Dates and times \_\_\_\_\_

Observation \_\_\_\_\_

Name of Employee \_\_\_\_\_

Supervisor \_\_\_\_\_