RECORD OF VERBAL COUNSELING

Team Member Name: _____

In the space below, please note conversations held in regards to behavior, conduct, and/or performance.

Initial Conversation	Date:	Time:
What happened? I would like to hear your side of the story.		
Plan of Action	Date:	Time:
This is a problem. Let's set goals and deadlines for improving.		
Follow Up		Time:
Has your performance improved? What's our next step?		
Manager Signature:		
Manager's Note: File in team membe		

Retailing