



Employee Consultation Form

EMPLOYEE INFORMATION

EMPLOYEE NAME: _____

RANK: _____

STORE MANAGER: _____

HIRE DATE: _____

TODAY'S DATE: _____

STORE #: _____

CONSULTATION INFORMATION

Reason for Consultation:

EMPLOYEE REACTION / ATTITUDE

Employee's Reaction:

MANAGER RECOMMENDATION / FOLLOW-UP ACTION

Consultation sent to Assistant V.P.?

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Employee's Signature

Manager's Signature