

MEMORANDUM

Note to File

Date:

Department / Division:

To:

Subject:

From:

Date(s) of Situation/Event:

Describe Situation / Event*:

For FM Personnel Review

Expectation of Employee:

Recommendation to FM Personnel:

☐ Note to File ☐ Coaching ☐ Corrective Action

Incident Safety Related?

☐ Yes ☐ No

CC: Employee
Department Manager

FM Personnel File
Supervisor

* Employee's Statement **must** be attached.