

Coaching/Counseling Form

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| TO: Supervisor/Manager And Employee | This form has been designed to record the thoughts and items that need to be discussed in the coaching session so that the conversation is productive and efficient and all points are covered sufficiently. The information discussed between the employee and supervisor or manager should remain confidential and be shared only with those who have a legitimate need to know, which includes HR and your manager/VP if appropriate. |
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| Supervisor/Manager Name: |
| Title: |
| Client: |
| Coaching VIA: In person Telephone: |
| Supervisor/Manager Signature: |
| Today's Date: |

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| RE: Employee |
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| Employee Name: |
| Assignment/Position/Title: |
| Client: |

| Facts about issues or behaviors being discussed | For each concern to be discussed, document the facts that occurred including as many details as possible. Use additional pages if necessary. |
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| Summary of issues or behaviors to be discussed | |
| Objectives to accomplish during the discussion | |
| Date(s) in the issues or behaviors took place | |
| History of previous discussions about these issues | |
| List witness or others involved in the concerns being discussed | |

| Solving the Problem | List facts, information needed, concerns, possible causes or reasons for the situation, alternatives, constraints and available resources. |
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| List information needed from employee, concerns, possible causes or reasons for the situation | |
| List alternatives, constraints, and available resources to help with the issues going forward | |

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| Future expectations/specific actions to be taken | |
| Consequences to employee if issues/behavior continues | |
| Follow up- Establish a date, time, place to follow up with the employee, schedule the meeting and follow through | |
| Were there any witnesses or others involved with the concerns/behaviors? | Yes No If so, Who? |
| Is there anything else that you would like the company to know that you feel is relevant to the concerns or behaviors discussed today? | Yes No |

Notes from the conversation

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| Supervisor/Manager | I spoke with my employees about these issues. |
| I wish to make an additional statement or comments below | Yes No |

My Comments

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| Supervisor/Manager Name: | Supervisor/Manager Signature: |
| Witness Name: | Witness Signature: |
| Today's Date: | |

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| Employee | I spoke with my supervisor or manager about these issues. |
| I wish to make an additional statement or comments below | Yes No |

My Comments

| | |
|----------------|---------------------|
| Employee Name: | Employee Signature: |
| Today's Date: | |

EMAIL TO HUMAN CAPITAL: HR@human-capital.com