



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL DEMETOR Associate #: _____

Location Name and No.: 269 ROXDALE Today's Date: OCT 26/2013

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)
 Suspension For _____ Days

Date of Incident: OCT 25/2013 Manager on Duty: _____

Description of Incident/Performance:
 TALKED ABOUT SMOKING & EATING WITHIN 3 HOUR SHIFTS NOT WITH OUT PERMISSION!

Recommended Action:
 AND DOING SIDE DUTIES AT THE END OF SHIFTS.

Jinan [Signature] Follow-up Date: _____

Follow-up Results: _____ Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: _____ I have read and understand this review.

Manager Signature: [Signature]



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL DEMETER

Associate #: _____

Location Name and No.: 269 REXDALE

Today's Date: OCT 27 / 2013

First Written Review

Second Written Review

Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: OCT 26 / 2013

Manager on Duty: _____

Description of Incident/Performance:

CLEANING HIS TABLES AT THE END
OF HIS SHIFT. (NOT BEEN DONE
MORE THAN ONCE)

Recommended Action:

Jinan

Follow-up Date: _____

Follow-up Results:

Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: _____

I have read and understand this review.

Manager Signature: [Signature]



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL DEMETER Associate #: _____

Location Name and No. 269 REXDALE #1957 Today's Date: Dec 7/2013

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: Dec 7/2013 Manager on Duty: Ane TORXORA

Description of Incident/Performance:

→ NO SHOW
 → NO CALLING
 ON SUNDAY Dec 8 HE CAME IN AND LET
 MANAGER KNOW THAT HE HAD FALLEN
 ASLEEP ALL DAY UNTILL 8:00 PM

Recommended Action:

Follow-up Date: _____

Follow-up Results:

Today's Date: _____

Jinan

Witness

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature:
I have read and understand this review.

Manager Signature:

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL DEMETER Associate #: _____

Location Name and No.: SWISS PLUS #1957 Today's Date: OCTOBER 12, 2014

First Written Review

Second Written Review

Final Written Review

(For Unionized facilities, as applicable)
 Suspension For _____ Days

Date of Incident: OCTOBER 12, 2014 Manager on Duty: GEORGIA

Description of Incident/Performance:

DANIEL HAD A TABLE THAT CAME INTO THE STORE CLOSE TO CLOSING TIME. AFTER THE GUEST GOT THEIR FOOD DANIEL TOLD THEM THAT THEY HAVE TO EAT AND LEAVE IN 5 MINUTES BECAUSE WE ARE CLOSED. THE GUEST GOT VERY UPSET. GEORGIA APOLOGIZED TO THE GUEST ABOUT WHAT DANIEL SAID AND TOLD THEM THEY CAN STAY THAT IF IT IS POSSIBLE TO PAY THE BILL BUT THEN THEY CAN STAY AND RELAX AND ENJOY THEIR MEAL. THE GUEST WAS STILL UPSET. GEORGIA TOLD DANIEL NOT TO ARGUE WITH THE GUEST AND WHEN GEORGIA WENT INTO THE KITCHEN TO GET A TAKE-OUT CONTAINER FOR THE GUEST, WHEN GEORGIA CAME BACK OUT DANIEL WAS ARGUING WITH THE GUEST AGAIN. HE DID NOT LISTEN TO HIS MANAGER GEORGIA.

Recommended Action:

HE WILL BE GETTING A WRITTEN WARNING FOR THIS INCIDENT. WHEN HE FOUND OUT THAT HE WILL BE GETTING A WRITTEN WARNING FOR THAT INCIDENT HE GOT VERY UPSET. HE SAID THAT SINCE HE IS GETTING A WRITTEN WARNING THAT HE WILL NOT COME TO WORK TOMMORROW EVEN AFTER HE TOLD ANNA THAT HE WOULD COME TO WORK TOMMORROW. GEORGIA TOLD DANIEL THAT IF HE DOES NOT COME TO WORK TOMMORROW THEN HE SHOULD NOT COME BACK.

Follow-up Date: _____

Follow-up Results:

Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: _____
I have read and understand this review.

Manager Signature: _____



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter Associate #: _____

Location Name and No.: Swiss Plus #1957 Today's Date: November 22, 2014

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)
 Suspension For _____ Days

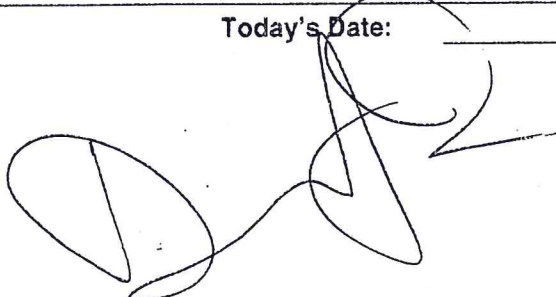
Date of Incident: November 22, 2014 Manager on Duty: Anna Teixeira

Description of Incident/Performance:
 Amanda was seating Guest's and when it was suppose to be Daniel's turn for a table the Guest's asked to be served by Jinan. Daniel got very upset and he was swearing at Amanda. That is unacceptable behaviour.

Recommended Action:
 He will be getting a written warning for his actions.

Follow-up Date: _____

Follow-up Results: _____ **Today's Date:** _____



Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: _____
 I have read and understand this review.

Manager Signature: _____

SUN. AFTER 9:00 PM
WITNESS LINDA

Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL DEMETER Associate #: _____

Location Name and No.: 269 REXDALL #1957 Today's Date: FEB 22 / 2015

First Written Review.

Second Written Review

Final Written Review

(For Unionized facilities, as applicable)
Suspension For _____ Days

Date of Incident: FEB 21 / 2015 Manager on Duty: ANA TEIXEIRA

Description of Incident/Performance:
DANIEL WAS DOING HIS READ AND MILZA WAS ON BREAK SITTING IN BACK OF DINING RM THEY WERE BOTH ARGUING BACK AND FORTH ABOUT DANIEL STATING THAT MILZA SHOULD GO BACK TO HIS COUNTRY AND THEY WERE GOING BACK & FORTH ARGUING WANTING TO GO OUTSIDE TO FIGHT. MANAGER STEPPED IN AND TO DEUSE THE SITUATION

Recommended Action:
AFTER MANAGER (ANA) TOOK THEM BOTH APART SEPRATE THEM, TALKED TO THEM ABOUT RESPECT IN THE WORK PLACE AND NOT TO BRING RACE RELIGION PERSONAL INSURES INTO THE WORK PLACE. THEY BOTH APOLOGIZED TO EACH OTHER, AND SHOOK EACH OTHERS HANDS, (WELL OK) Follow-up Date: _____

Follow-up Results: Today's Date: _____
WITNESS MING / MARLON
VERBAL WARNING, IF IT KEEPS PERSISTING ACTIONS WILL BE TAKEN!
(WITNESS SIMAN)

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: [Signature]
I have read and understand this review.

Manager Signature: [Signature]



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL Associate #: _____
Location Name and No.: 269 REDDALE Today's Date: APRIL 10 2014

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)
 Suspension For _____ Days

Date of Incident: APRIL 10 2015 Manager on Duty: [Signature]

Description of Incident/Performance:
 I HAVE SPOKEN TO DANIEL ABOUT DISTRACTING THE GIRLS AT WORK PANTRY BAR AND HOSTESS TO MUCH TALKING, HE HAS A JOB TO DO AS A SERVER AND

Recommended Action:
 THAT IS TO TAKE CARE OF HIS TABLES AND NOT TO BE TOLD WHAT TO DO

Follow-up Date: _____

Follow-up Results: [Signature] Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: _____ I have read and understand this review.

Manager Signature: [Signature]

Corrective Action Form



Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DEMETER DANIEL Associate #: 0524

Location Name and No.: SWISS CHALET 1957 Today's Date: 10 MAY 15

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: _____ Manager on Duty: _____

Description of Incident/Performance:

HAVE AN AGREEMENT WITH ANOTHER ASSOCIATES.
 WANTED TO START A FIGHT.
 ASSOCIATES AND MANAGER HAVE TO STOP THEM BEFORE
 THE FIGHT REALLY STARTED

Recommended Action:

I SAW YOU HOLD UP TWO HANDS WITH FISTS AND SAID "FIGHT ME, FIGHT ME" TO STELIO WHILE HE HAVE BETH HANDS DOWN, YOU ARE STARTING A FIGHT. PLEASE STOP THIS. AND WALK AWAY FROM AGREEMENT AND REPORT TO MANAGER IF YOU HAVE ANY ISSUE.

Follow-up Date: _____

Follow-up Results: _____ Today's Date: _____

[Handwritten signature]

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: [Signature]
I have read and understand this review.

JINAN
STEWART

Manager Signature: [Signature] JOE TANG



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL Associate #: _____
Location Name and No.: 269 REXDALE Today's Date: MAY 24/2015

First Written Review _____
Second Written Review _____
 Final Written Review _____

(For Unionized facilities, as applicable)
 Suspension For _____ Days

Date of Incident: MAY 24/2015 Manager on Duty: Joe Law

Description of Incident/Performance:
SWEARING THE F WORD IN DISH AREA, MR. JOE HEARD THIS.

Recommended Action:
NEXT WARNING WILL BE SUSPENSION

Follow-up Results: _____ Follow-up Date: _____
Today's Date: DRR
Sinen

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: _____
I have read and understand this review.

Manager Signature: [Signature]

Corrective Action Form



Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter Associate #: _____

Location Name and No.: Swiss Plus #1957 Today's Date: Friday June 19, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)
 Suspension For _____ Days

Date of Incident: Sunday June 14, 2015 Manager on Duty: Georgia

Description of Incident/Performance:

Daniel was on break with a few of the other associates at lunchtime. Georgia went over there and saw that he had a cigarette behind his ear. When Georgia asked him about it he got very defensive. He said it is a cigarette behind his ear. He said that he forgot that it was there. I forgot is not a proper answer. He should know better. This restaurant is a no smoking restaurant.

Recommended Action:

He is getting a written warning for this incident.

Follow-up Date: _____

Follow-up Results:

If this happens again then he will get a second written warning.

Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature:

I have read and understand this review.

Manager Signature:



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter

Associate #: _____

Location Name and No.: Swiss Plus #1957

Today's Date: Friday June 19, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: Sunday June 14, 2015

Manager on Duty: Georgia and Venice

Description of Incident/Performance:

Georgia saw Daniel hanging around the bar just talking to the other associates. He should be taking care of his tables. Venice also witnessed this incident.

Recommended Action:

He is getting a _____ written warning for this.

Follow-up Date: _____

Follow-up Results:

Today's Date: _____

If this happens again then he will get a third written warning and he will be suspended for 1 day.

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature:
I have read and understand this review.

Manager Signature:



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter **Associate #:** _____

Location Name and No.: Swiss1957 **Today's Date:** June 20, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: June 14, 2015 **Manager on Duty:** Venice, Georgia

Description of Incident/Performance:

Daniel finished his shift without completing his side work or cleaning up several tables where he had a party. He left the tables full of plates, cups, napkins and other garbage. I (Venice) had to clean all his tables.

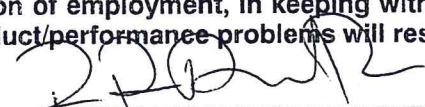
Recommended Action:

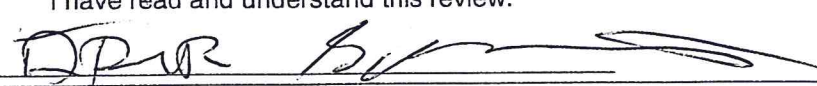
Follow-up Date: _____

Follow-up Results:

Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: 
I have read and understand this review.

Manager Signature: 





Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter **Associate #:** _____

Location Name and No.: Swiss Plus # 1957 **Today's Date:** Sat. June 20, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: Saturday June 20, 2015 **Manager on Duty:** Ana and Georgia

Description of Incident/Performance:

Daniel came to the front of the bar and demanded Ana the manager why did he get skipped from a table? The guests could hear him. The time was 7:35pm. He does not get anymore tables after 7:15pm due to takeover. If he has a problem with the way Ana seats the guests then he should wait until after his shift to discuss it, not in front of the guests.

Recommended Action:

He will be given a written warning for this incident.


Follow-up Date: _____

Follow-up Results:

Today's Date: _____

If this happens again then he will be given a second written warning.

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: 
I have read and understand this review.

Manager Signature: _____





Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL C Associate #: _____

Location Name and No.: 269 REXDALE #A157 Today's Date: June 27/2015

First Written Review

Second Written Review

Final Written Review ✓

(For Unionized facilities, as applicable)

Suspension

For 23 Days

Date of Incident: JUNE 27/2015 Manager on Duty: AMER

Description of Incident/Performance:

- IT WAS DANIEL'S TURN FOR SEATING HOSTESS (KAREN) WENT WITH GUESTS TO HIS TABLE BUT HIS TABLES WERE ALL DIRTY, SO THEN HOSTESS WENT TO CLEAN TABLE MISSING HIM, HE THEN APPROACHER IN A VERY RUDE IN A

Recommended Action:

IN APPROPRIATE MANNER DEMANDING HIS TURN, IN THE DINING ROOM.

- THEN HE WENT TO THE PODIUM ON HIS OWN TOOK GUESTS SAT HIMSELF HIS OWN TABLE

Follow-up Results:

Today's Date:

GUESTS GOT UP AND LEFT HIS STATION WANTING TO GO TO ANOTHER SERVER;

IF THIS HAPPEN'S AGAIN TERMINATION

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: [Signature] I have read and understand this review.

Manager Signature: [Signature]

[Handwritten mark]



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: DANIEL Associate #: _____
Location Name and No.: 269 BEXDALE Today's Date: JUNE 23/2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)
 Suspension For _____ Days

Date of Incident: _____ Manager on Duty: _____

Description of Incident/Performance:
TAKING SEVERE FROM TEAMMATE WITH GUESTS ON TABLE MAKING GUEST'S ON HAPPY

Recommended Action:

 Follow-up Date: _____

Follow-up Results: _____ Today's Date: _____

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: [Signature]
 I have read and understand this review.

Manager Signature: [Signature]

[Signature]



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter

Associate #: _____

Location Name and No.: Swiss Chalet/Harvey's

Today's Date: September 27, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: September 26, 2015

Manager on Duty: Ana/Georgia

Description of Incident/Performance:

Daniel was acting inappropriately in the kitchen. He was swearing and saying racially offensive remarks to Minh. He was saying go back to China. This was observed by the kitchen staff as well as the dining room manager.

Recommended Action:

This will be Daniel's final written warning.

Follow-up Date: _____

Follow-up Results:

Today's Date: _____

If this kind of incident occurs again then Daniel will be suspended.

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature:
I have read and understand this review.

Manager Signature:



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter

Associate #: _____

Location Name and No.: Swiss Chalet/Harvey's

Today's Date: October 15, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days

Date of Incident: October 11, 2015

Manager on Duty: Ana

Description of Incident/Performance:

At 1:20pm on Sunday October 11, 2015 Daniel was standing with Harpreet at the take-out area talking. He was eating cheddar cheese with his fingers from the same container that is used for the guests. He is not allowed to eat while he is punched in and he is **never** allowed to eat with his fingers. It is unsanitary. He knows this.

Recommended Action:


Daniel will be given his first written warning for this issue.

Follow-up Date: _____

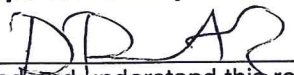
Follow-up Results:


Today's Date: _____

If this happens again then he will be given a second written warning.

 Jinau

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: 
I have read and understand this review.

Manager Signature: 



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter

Associate #: _____

Location Name and No.: Swiss Chalet/Harvey's

Today's Date: October 15, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For 1 Days

Date of Incident: October 12, 2015

Manager on Duty: Georgia

Description of Incident/Performance:

Daniel was arguing with Mira about his section in the dining room. He did not want to stay in that section because the section was full. The section was not full. He had 2 tables in his section that were empty and the other tables were almost finished plus there were pick-up tables available. Mira refused to let him move to another section. He swore at her. He was sarcastic with Mira and telling her "don't you understand what I am saying or do I have to talk to you in polish".

Recommended Action:


Daniel will be suspended for 1 day.

Follow-up Date: _____

Follow-up Results:

If this happens again then he will be suspended for 3 days.

Today's Date: _____

 Jinan

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature:  I have read and understand this review.

Manager Signature: _____



Corrective Action Form

Use this form to document critical disciplinary and developmental performance discussions. This form should be signed by the Associate and retained in the Associate's file.

Associate Name: Daniel Demeter Associate #: _____

Location Name and No.: Swiss Chalet/Harvey's Today's Date: October 10, 2015

- First Written Review
- Second Written Review
- Final Written Review

(For Unionized facilities, as applicable)

Suspension For _____ Days


Date of Incident: October 10, 2015 Manager on Duty: Ana

Description of Incident/Performance:
 Daniel was sitting with his Guest at the table and eating his meal which was a hot rotisserie sandwich. He is not allowed to sit with the Guest. He was not punched out and he was in uniform. That is not allowed.
(SO WRONG)


Recommended Action:
 This will be his first written warning.

Follow-up Date: _____

Follow-up Results: If this happens again then he will get a second written warning. **Today's Date:** _____


J. Wan

Should a similar or other incident occur while you are employed with Cara Operations Limited, and depending on the nature and severity of the incident, the result will be another written review, suspension or potentially termination of employment, in keeping with the Company's policies. If this is a final warning, any further misconduct/performance problems will result in termination of employment.

Associate Signature: 
 I have read and understand this review.

Manager Signature: 