**YOUTH MINISTRY DISCIPLINARY ACTION FORM**

Youth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth Leader:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TYPE OF ACTION:**

 Verbal Counseling: [ ]

 Written Warning: [ ]

Family Counseling: Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expulsion: Effective \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date(s) of Incident\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time of Incident:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Incident: Description:

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Corrective Action Plan:

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Next Action Step If Problem Continues:

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I acknowledge receipt of this disciplinary action and that its contents have been discussed with me. I understand that my signature does not necessarily indicate agreement.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Youth Signature & Date

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Youth Leader Signature & Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_