

Formal Performance Improvement Procedure Form to register Written Warnings / Dismissal /Appeal action



FPIP 5

**Instructions: 1) Decision / Appeal Officer to complete relevant sections
2) HRConnect to register action taken**

**Complete Sections A and E.
Complete either Section B, C or D as applicable**

SECTION A - Details of Employee

Employee First Name(s):	
Employee Surname:	
Employee Payroll Number:	

SECTION B – Written warning/Final written warning

Details of Decision Officer

Full Name:	
E-mail Address:	
Telephone No:	

Outcome: <small>Complete as appropriate (tick one box only)</small>	<input type="checkbox"/> Written warning
	*Expires on:
	<input type="checkbox"/> Final written warning
	*Expires on:

SECTION C – Dismissal

Details of NICSHR Decision Officer

Full Name:	
E-mail Address:	

Telephone No:	
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Outcome: Complete as appropriate (tick one box only)	<input type="checkbox"/> Dismissal	
	Notice period:	weeks
	Dismissal Date:	
	Compensation:	£
	Leave Balances: Is the Employee due payment for any untaken annual leave upon their termination date? If Yes, please enter the number of days/hours: Please ensure that the employee's record is fully updated prior to the leaving date, including sick absence, overtime and flexi hours.	

SECTION D – Appeals
Details of Appeal Officer

Full Name:	
E-mail address:	
Telephone number:	
Outcome: Complete as appropriate (tick one box only)	<input type="checkbox"/> Written warning stands
	<input type="checkbox"/> Final written warning stands
	<input type="checkbox"/> Dismissal stands
	<input type="checkbox"/> Removal of written warning
	<input type="checkbox"/> Removal of final written warning
	<input type="checkbox"/> Removal of dismissal

SECTION E – Authorisation

Name of Decision Officer/Appeal Officer: (in BLOCK CAPITALS)	
Grade of Decision Officer / Appeal Officer: (in BLOCK CAPITALS) Appropriate grades are outlined in HR Policy 10.01 Performance Management –Section 8, para 8.1.5	
Signature of Decision Officer/ Appeal Officer (if hard copy):	
Date: (Format DD/MM/YYYY)	

Please email this form directly to the email address below; hard copy forms should be scanned then emailed. This will ensure you receive an automatic acknowledgement of your form, so you can be sure it has been received. Forms sent by post may take longer and you will not receive an automatic acknowledgement. There is NO requirement to post a hard copy of a form you have emailed to HRConnect.

Please return completed form to:

Non Industrial

Post:

HRConnect (NICS)
PO Box 1090
Beacon House
27 Clarendon Road
Belfast
BT1 9EX

Email:

NICS@HRConnect.nigov.net

Industrial

Post:

HR Connect (Industrial)
PO Box 1227
Beacon House
27 Clarendon Road
Belfast
BT1 9LA

Email:

Industrial@HRConnect.nigov.net

NIO:

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