Memo

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| --- | --- |
| To: | Employee |
| From: | Department Head or Supervisor |
| Cc: | Provide name of union president, grievance rep, and HR Director & HR file |
| Date: |  |
| Re: |  |
|  |  |

You are scheduled for a counseling meeting on Click here to enter a date. at Click here to enter text. in my office: Click here to enter text..

The subject of the meeting is to discuss: Click here to enter text..

You have the right to a representative of your choice at this meeting.