



STEELCRAFT WELDERS NIGERIA LIMITED

...Where Craftsmanship Meets Durability

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APPRENTICE DISCIPLINARY ACTION FORM

Ref No.: SCWNL/FRM/DISC/013-2025

Apprentice Name: _____

Department: _____

Supervisor: _____

Date of Incident: _____

1. Type of Violation (Tick One)

Absenteeism

Late Coming

Safety Violation (PPE Non-Compliance)

Insubordination

Fighting or Misconduct

Theft or Tool Misuse

Negligence

Other: _____

2. Description of Incident

3. Action Taken

- Verbal Warning
- Written Warning
- Suspension
- Termination (Final)
- Other: _____

4. Supervisor Comments

Supervisor Signature: _____

Date: _____

Apprentice Signature: _____

Date: _____

Assistant Director Approval: _____

Lawyer Endorsement (if required): _____