

NOTICE OF SUSPENSION

(After considering presentation by employee)

1.1 Employee's full names	
1.2 Employee number:	1.3 Position:
1.4 Outlet:	1.5 Department:
1.6 Summary of the alleged transgression:	1.7 Effective date of suspension:

2. Kindly be advised that the company has considered the following reasons provided by you for not being suspended: _____

3. The decision of the company is to suspend you with immediate effect pending the outcome of the investigation.
4. Your suspension will be on full pay/without pay.
5. You are not required or permitted to render any services until further notice, but you are required to be available to be contacted as the need may arise. Please ensure that you keep your direct manager informed of your current contact details. Failure or refusal to do so may result in further disciplinary action as this should be regarded as a direct instruction given to you. You are not allowed to leave the _____ area of work without prior permission from your direct manager, in writing, whilst you are on suspension.
6. Should you require access to the premises or documents or witnesses, approval must be obtained from your direct manager. Witnesses will be made available as it is operationally possible.
7. Conditions of suspension: *(delete if not applicable)*
- Since you are still in the employ of the Company pending the investigation you will be allowed to use the Company's cell phone issued to you to be contacted by the Company or to contact the Company.
 - The laptop issued to you must be left at the company.
 - You are required to hand in your company keys and access card.
 - Any further conditions attached to the suspension:

Served/issued by (Full names):

Signature:

Date:

Initial each page & a full signature on the last page on the space provided

Received by employee (Full names): _____

Signature:

Date:

Please note that by signing this notice you are not admitting guilt but merely acknowledge receipt of this suspension notification. Should the employee refuse to sign the witness must attest to the fact that the notice was properly issued and explained.

I (Witness's full names if applicable), _____

Confirm that the notice was served to the employee and the contents thereof were read and explained to him/her, and the employee refused to acknowledge receipt thereof.

Signature:

Date: