Date: [Insert Date]

To: [Employee Name]
Employee ID: [Insert ID]
Department: [Insert Department]

Subject: NOTICE AND WARNING FOR FAILURE TO WEAR SAFETY GEAR

Dear [Employee Name],

This letter serves as a formal warning regarding your failure to comply with the company's safety protocols. It has been observed that on [Date] at approximately [Time], you were not wearing the required Personal Protective Equipment (PPE) while performing your duties in [Location/Area].

Specifically, you were found to be missing the following required gear:

- [Insert specific item, e.g., Safety goggles]
- [Insert specific item, e.g., Hard hat]
- [Insert specific item, e.g., Steel-toed boots]

Adherence to safety regulations is a mandatory condition of your employment. These rules are in place to protect your health and the safety of your colleagues. Failure to wear appropriate gear creates unnecessary risk and is a violation of the [Company Name] Safety Policy.

Corrective Action Required:
You are required to wear all designated safety gear immediately and at all times while in restricted or hazardous areas. Failure to comply with safety standards in the future may result in further disciplinary action, up to and including termination of employment.

Please sign below to acknowledge that you have received this warning and understand the safety requirements of your role.

Sincerely,

[Your Name]
[Your Title]
[Company Name]

Employee Acknowledgment:

I acknowledge that I have received this warning and understand the safety policies of the company.

Signature: _____ Date: _____