



EMPLOYEE TERMINATION NOTICE

EMPLOYEE INFORMATION

Employee Name: _____ Social Security Number: XXX-XX- _____
 Job Title: _____ Date of Termination: _____
 Employer/Client Name: _____ Last Day Worked: _____

SEPARATION REASON

VOLUNTARY Quit (1) (Pick up to two)

PERSONAL REASON (F)

- Moved (E)
- School (L)
- Illness/Medical (H)
- Accepted another Job (D)
- Transportation Issues (G)
- Retirement (I)
- Job Refused (6)

DISSATISFIED

- Salary (c)
- Supervisor (d)
- Work Conditions (e)
- Company Policies (b)
- Work Hours (f)

MILITARY (7)

FAILED TO SHOW OR RETURN (k)

- Abandoned job/failed to appear or call (a)
Date employee notified: _____
- Failed to return from leave (3)
Date employee notified: _____

NO REASON GIVEN (M)

OTHER (j) _____

INVOLUNTARY Termination (2) (Pick up to two)

GROSS MISCONDUCT

- Dishonesty/theft (V)
- Violence (Y)
- Deliberate Safety (W)
- Insubordination (S)
- Harassment (J)
- Drug/Alcohol (N)
- Falsifying Documents (Z)

COMPANY INITIATED

- Job Eliminated (P)
- Lack work/Layoff (5)
- Reduction Workforce (8)

NOT A GOOD FIT (9)

COMPANY POLICY VIOLATION (R)

PERFORMANCE

- Not qualified for job (i)
- Unsatisfactory Performance (h)
- Failure to complete probationary period (K)

DECEASED (4) DATE OF DEATH _____

Explain in detail the reason selected including events leading up to it:

Is Employee Eligible for rehire? Yes No If not eligible or only under certain circumstances, explain?

SIGN, DATE, ATTACH SUPPORTING DOCUMENTATION, RETURN TO PAYROLL CONTACT.

Employer/Client Signature: _____ Date: _____

Printed Name: _____ Title: _____

INTERNAL USE: ERM	ERA	PES	Company #:	CSC Name:
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