



Termination Form

Name:	Date Notice Was Received*:
Job Title:	Date of Termination:
Department:	Last Day Worked:
Supervisor Name:	

Reason for Termination:

Resignation (personal, changing career path, return to school, relocation)

Cause (misconduct, performance, violation of policy)

Resignation in Lieu

Business Requirements (reduction in force, expiration of contract)

Death

Retirement

Other: _____

Return of Company Property:

Laptop

Keys

Prox Card

Other: _____

Additional notes for Human Resources

Signatures

Supervisor Signature: _____ Date: _____

*Please send the resignation letter or email to Human Resources.