

EMPLOYEE SEPARATION NOTICE

Employee Name: _____ **Social Security #:** _____
Print (Last), (First) (MI)

Client Company: _____ **Client #:** _____

Last Day Worked: _____ **Date of Termination:** _____

Reason for Separation:

- Employee voluntarily resigned, reason: _____
- Lay-Off/Reduction in staff
- 90-day probation/unsatisfactory work performance
- Poor work performance Explanation: _____
- Gross misconduct
- Failure to comply w/company policy/procedure
- Disregard for supervisor/co-worker/customer
- Insubordination
- Failure to do job
- Violation of Safety Policy
- Absenteeism/Tardiness
- Other _____

Employee Statement:

I have not suffered any personal injuries during my employment at _____

Employee Signature: _____ **Date:** _____

Employee unavailable for signature, copy mailed **Employee refused to sign**

Forwarding Address for last pay check and W2's: _____

Supervisor's comments: _____

Employee's comments: _____

Was the employee paid?

- In lieu of notice If yes, amount _____ for period ___/___/___ to ___/___/___
- Severance If yes, amount _____ for period ___/___/___ to ___/___/___
- Vacation/PTO If yes, amount _____ Benefits thru date _____

Supervisor Signature: _____ **Date:** _____

Employee Signature: _____ **Date:** _____



FOR ELITE PAYROLL SOLUTIONS USE ONLY (Property Receipt form should also be completed)

Date received: _____ **Date Processed:** _____ **Address Change updated if applicable** Y N