

EMPLOYEE SEPARATION FORM

EMPLOYEE NAME AND NUMBER:	
POSITION:	
SUPERVISOR:	
HIRE DATE:	
EFFECTIVE DATE:	
LAST DAY WORKED:	
TYPE OF SEPARATION: <input type="checkbox"/> Voluntary Quit <input type="checkbox"/> Involuntary Quit	
<input type="checkbox"/> Other (Please Explain)	
REASON FOR SEPARATION: <input type="checkbox"/> Lack of work <input type="checkbox"/> Voluntary <input type="checkbox"/> I-9 Non-Compliance	
<input type="checkbox"/> Violation of Company Policy (Conduct, Performance, etc.)	
Please explain	
EVALUATION: Check each box below for which the employee's performance was acceptable.	
<input type="checkbox"/> Production <input type="checkbox"/> Conduct <input type="checkbox"/> Safe Practices <input type="checkbox"/> Quality <input type="checkbox"/> Attendance <input type="checkbox"/> Adherence to Policy	
IS EMPLOYEE ELIGIBLE FOR REHIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO	

FORWARD EMAILS AND PHONE TO _____

BELOW IS FOR OFFICE USE ONLY

Initial Checklist

Deduct screening costs

- I-9: File in termed I-9 folder
- COBRA: Notify Cornerstone
- BENEFITS: Health Dental Vision Life 401(k) FSA
- iPS: Terminate in iPS
- Calculate Vacation: Days in year – 365 (Ttl Vac – Vac Used) = Vacation days to be paid _____
- Calculate Final Check \$ Final Check: Mail Hold for pick up Direct Deposit
- NOTIFY PAYROLL DEPARTMENT
- GARNISHMENTS Notify iPS State or County Official if relevant
- M2M: Terminate in M2M Disable ALL network access, remote access, email, phone
- PERSONNEL FILE: Update file, insert benefit file inside and file in terminated drawer
- OBTAIN COMPANY OWNED PROPERTY: Computer, Phone, ID Badge, Keys, Credit Cards, Building Keys, Hard Hat
- Disable Alarm Password Notify IT (Server Access, Emails, Passwords) Notify Admin (Enterprise, etc.)

*****PLEASE COMMENT ON EVENTS SURROUNDING TERMINATION*****

(Attach copy of documented employee warnings if applicable)

Employee Signature	Date
Supervisor Signature	Date