

### Employer Information

Client Number:

Client Name:

### Employee Information

Employee Name:

Social Security Number:

Last Day Worked:

### Termination Information

- |                            |                           |
|----------------------------|---------------------------|
| 90 Day Probationary Period | No Call/No Show           |
| Back to School             | Performance               |
| Incarcerated               | Personal Issues           |
| Insubordination            | Positive Drug Screen Test |
| Layoff                     | Quit With Notice          |
| Left for Another Job       | Quit Without Notice       |
| Medical                    | Seasonal/Part-time        |
| Misconduct                 | Tardiness/Absenteeism     |
| Moved Out of Area          | Walked Off                |
|                            | Other                     |

Please Provide a Detailed Reason for Termination: \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Date \_\_\_\_\_

### Unemployment Information

Yes

No

1. Is there documentation of prior misconduct? If so, please provide.

2. Are there records of tardiness or absenteeism? If so, please provide.

### FFEL USE ONLY

Received by:

Processed by:

Date:

Date: