**Employee Name:**

**Classification/Trade: Separation Date:** , **at** **AM/PM (circle one)**

**Action:** **Voluntary Resignation** **Reduction in Work Force (lack of work)** **Performance Issues**

**Explanation (required):**

**Complete for Performance Issues**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Good** | **Fair** | **Poor** |
| **Skills** |  |  |  |
| **Conduct/Attitude** |  |  |  |
|  |  |  |  |

**Eligible for Rehire?** Yes No Not at this time

**Signatures:**

**Supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_ **Employee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_

Provide completed form to Employee as they are leaving premises.