

Separation Notice

PLEASE PRINT

Name _____ Employee/Payroll # _____
LAST FIRST MIDDLE
 Position _____ Department _____
 Hire Date ____/____/____ Last Day Worked ____/____/____ Termination Effective Date ____/____/____

Type of Separation Please check only one

- Dismissal Layoff Mutual Agreement Resignation Retirement Leave of Absence
 Other _____

Reason for Separation

Employee: Please check all that apply

I have read & understand and agree to the above Separation Notice

Employee's Signature _____ Date ____/____/____

Employee Evaluation (For Rehire)

Rating: Considering all factors, check the definition which best describes the employee's overall performance.

Outstanding: This rating best describes a level of accomplishment that goes well beyond reasonable but demanding standards of performance, especially in the key, critical areas of major responsibilities.

Good: This rating is reserved for those who clearly demonstrate performance which meets all the requirements of the position in terms of quality and quantity of output.

Improvement Needed: This rating best describes employees who have the ability to complete most assignments, however, the need for improvement and further development is clearly recognized.

Unsatisfactory: This category includes the noticeably less than acceptable. Performance of those whose work in terms of quality and quantity is obviously below job requirements, even when close supervision has been provided.

CATEGORY	OUTSTANDING	GOOD	IMPROVEMENT NEEDED	UNSATISFACTORY
1. Attendance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Quality of Work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Productivity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Conduct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Overall Performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Would you rehire this employee? Yes No

Comments: _____

Supervisor's Signature _____ Date ____/____/____



Separation Notice #5881 (stock), #58811 (imprinted)
 This form does not constitute legal advice to the employer. To determine whether an employee would violate Federal, State or Local law, you should seek professional advice.
 Seller assumes no responsibility for the employer's use of this form and decisions based on the information provided on this form.