Record of Termination



Employee Information					
Employee Name:			On-Site Employer:		
Hire Date:	Last Day Worked:		Separation Date:		
Rate of pay:	Full time		Part time		
Address to which w-2 should be mailed					
Voluntary resignation (attach letter of resignation and check all that apply)					
Return to school F	Personal reasons	Job abandonment	Relocation	Dissatisfied with job	
No reason given	Retirement	irement To accept other work		rk In lieu of discharge	
Work hours/job responsibility change					
Lay off: Lack of work	Job eliminated				
Documentation If you have selected involuntary resignation, attach all documentation, written warnings, incident notes, dates, witnesses, and explanations to clarify and support termination decision.					
Involuntary resignation (check	more than one if appropria	ate)			
Absenteeism	Failed evaluation period		Failure to meet performance expectations		
Tardiness	Disregard for coworkers, customers, clients		Violation of company policiies and procedures		
Insubordination	Not qualified for position		Other		
Upon separation, indicate whether employee has or will receive any of the following:					
Compensation Type	Date to b	e paid	Period Covered	Amount Paid (gross)	
Vacation					
Severance					
Wages In-lieu of notice					
Sick					
Did you follow Human Capital's human resources recommendation? Yes No If yes, state the person's name:					
Employee Name (please print):		Employee Signature:			
Employer Name (please print):		Employer Signature:			
Witness Signature:					
Human Capital Use Only					
Processed By:			Date:		

EMAIL TO HUMAN CAPITAL: HR@human-capital.com

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