**Employment Termination Form**

|  |  |  |
| --- | --- | --- |
| **Employee General Information** | | |
| Employee Name: | | Badge ID: |
| Department: | | Role/Title: |
| Supervisor Name: | | Badge ID: |
| Last Day Worked: | | Termination Date: |
| **Employee Contact Information** | | |
| Email Address: | Phone Number: | |
| Forwarding Address: | | |

|  |  |
| --- | --- |
| **Task** | **Status** |
| Collect company equipment, tools, etc. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Collect company credit cards, expense account cards, etc. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Complete exit interview process and document findings. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Finalize employee’s expense reports. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Send termination notice or resignation confirmation. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Collect sensitive work documents. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Change shared login credentials. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Disable employee access to control system network. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Cancel any pending training sessions or work-related trips. | ☐ Complete   ☐ Incomplete ☐ N/A |
| Transfer incomplete projects and MOCs to another employee. | ☐ Complete   ☐ Incomplete ☐ N/A |
| By submitting this form, the supervisor verifies that all company property has been received/returned, management of change tasks are documented, and all documentation has been submitted to HR for review. | |