





Human Resources Department  
Forms and Documents

Effective Date: 2/18/13

# TERMINATION REPORT

This report should be filled out by the immediate supervisor for all terminations, and must be completed on the last day of work.

## EMPLOYEE INFORMATION

Name CHARLTON KIRKCONNELL Emp. ID No. \_\_\_\_\_  
 Department Golf Job Title CART ATTENDANT  
 Forwarding Address \_\_\_\_\_  
 Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## REASON FOR TERMINATION

(Mark appropriate reason; if resignation, letter of resignation from employee must be attached)

- |  |   |
|--|---|
| <input type="checkbox"/> A. Employee resignation – Unknown reason            | <input type="checkbox"/> H. Laid off – Temporary Only   |
| <input type="checkbox"/> B. Employee resignation – Leaving city              | <input type="checkbox"/> I. Employee released – Gross misconduct in connection with work            |
| <input type="checkbox"/> C. Employee resignation – Attend school             | <input type="checkbox"/> J. Employee released – Insubordination, including refusal to work overtime |
| <input type="checkbox"/> D. Employee resignation – Job dissatisfaction       | <input type="checkbox"/> K. Employee released – Unacceptable job performance                        |
| <input checked="" type="checkbox"/> E. Employee resignation – Another job    | <input type="checkbox"/> L. Employee released – Unacceptable behavior or conduct                    |
| <input type="checkbox"/> F. Employee resignation – Failure to report to work | <input type="checkbox"/> M. Employee released – Unacceptable attendance including tardiness         |
| <input type="checkbox"/> G. Retirement                                       | <input type="checkbox"/> N. Other   |

If Box H, I, J, K, L, M or N was checked, then a written statement explaining the termination is required. Please attach an additional sheet or write the statement on the back of this form. The statement should list any date, times and/or actions taken for incidents that led to a termination. Please contact the Human Resources Director if there are any questions.

Last Date Worked: 12/31/18 Check if employee was still in probationary period:

Have all employee badge, keys, radio, other equipment, and uniforms been turned in?

Yes  No. (If "no," final paycheck will be held pending audit of uniforms.)

[Signature] \_\_\_\_\_ 1/26/18 \_\_\_\_\_  
 Department Head Signature Date Mayor Date

City Treasurer \_\_\_\_\_

Human Resources \_\_\_\_\_