

REPORT OF EMPLOYEE SEPARATION

Supervisor must complete this report and submit to HR with all other separation paperwork

EMPLOYEE'S NAME:		EMPL ID:	
JOB TITLE:		DEPARTMENT:	
LAST PHYSICAL DAY WORKED:		DATE REMOVED FROM PAYROLL:	

Please select the primary reason for separation from the list below:

VOLUNTARY SEPARATION: Employee provided () days Advanced Notice of Resignation

- | | |
|---|---|
| <input type="checkbox"/> Better Pay
<input type="checkbox"/> Career Advancement Opportunity
<input type="checkbox"/> Career Change/Self-Employment
<input type="checkbox"/> Conflict w/Coworker(s)
<input type="checkbox"/> Family Reasons
<input type="checkbox"/> Health Reasons | <input type="checkbox"/> Work Arrangements (hours, duties, etc)
<input type="checkbox"/> Pursue Education
<input type="checkbox"/> Conflict w/ Supervision
<input type="checkbox"/> Relocation
<input type="checkbox"/> Resignation in Lieu of Disciplinary Action
<input type="checkbox"/> Retirement |
|---|---|

INVOLUNTARY SEPARATION:

- | | |
|---|--|
| <input type="checkbox"/> Death
<input type="checkbox"/> End of Temp or Short-term Assignment
<input type="checkbox"/> Failure to Return from an Approved Leave
<input type="checkbox"/> Grant-funded Position Eliminated
<input type="checkbox"/> Job Abandonment | <input type="checkbox"/> Probationary Discharge
<input type="checkbox"/> Reduction in Force
<input type="checkbox"/> Unsatisfactory Performance/Rule Violation
<input type="checkbox"/> Work Permit Expired |
|---|--|

SUPERVISOR'S RECOMMENDATION REGARDING RE-EMPLOYMENT (Staff Only) -

Your recommendation is not necessarily a bar to any future employment for this person; however, should you answer "no" that information will be released with all future UNT Dallas applications.

WOULD YOU CONSIDER RE-EMPLOYING THIS PERSON IN YOUR DEPARTMENT? Yes No

Please explain:

Supervisor's Name (print):		Title:			
Supervisor's Signature:		Date:		Phone:	