BEACH SHOPS

EMPLOYEE INFORMATION

EMPLOYEE SEPARATION FORM

LAST NAME, FIRST NAME	EMPLOYEE ADP FILE #	DEPARTMENT #
EMPLOYEE CLASSIFICATION		
FULL-TIME PART-TIME RE		PART-TIME TEMPORARY** 6-month grace period**.
SEPARATION DETAILS		
Effective Date of Separation (Last day scheduled to work):		
 RESIGNATION Verbal Resignation - please attach written documentated describing when, how, and to whom the verbal resign was given. Written Resignation - please attach written resignation documentation received. LAYOFF 6-Month grace period is ending. Position is eliminated. Rehire Eligibility Would you rehire this employ. Yes No. Is there supporting documentation in the Comments: 	 The verbal resignation Dismissal/Discharge- requires HR Director approval prior to termination. 3 consecutive days of "no call, no show"- please attach background documentation. Retirement- please attach copies of written retirement notification. 	

I understand and certify that the foregoing personnel data is accurate and correct for this separation request as specified.

Manager Signature : _____

Date : _____

HUMAN RESOURCES REPRESENTATIVE TO COMPLETE BELOW THIS LINE

SCHOOL/STAFF ID #:

ENTERED IN ADP BY:

DATE: