

Termination Form for Employee to Sign

Employee Details:

- Full Name: _____
- Position: _____
- Department: _____

Termination Details:

- Effective Termination Date: _____
- Reason for Termination: _____
- Notices Provided:
 - Written Notice
 - Verbal Notice
 - No Notice Provided

Acknowledgment by Employee:

By signing this form, I acknowledge receipt of the termination notice and agree to the terms outlined in this document.

Employee Signature: _____

Date: _____

Manager Signature: _____

Date: _____

Optional Comments or Feedback by Employee:
