



# EMPLOYEE SEPARATION FORM

**EFFECTIVE DATE**

**FULL Legal Name as it appears in MUNIS**

**Employee ID #**

**Current Job Assignment**

**Campus or Department**

**FT/PT**

**TERMINATION**

**RESIGNATION**

**RETIREMENT**

**ELIGIBLE FOR REHIRE**

**YES**

**NO**

**Last Date Worked**

**Reason for Termination/Resignation:**

**Forwarding Address:**

**Street Address**

**City**

**State**

**Zip**

**COMMENTS**

**Employee Signature**

**Date**

**Supervisor Signature**

**Date**

**Personnel Comments**

**Director's Signature**

**Date**