



EMPLOYEE TERMINATION FORM

Employee Name: **Amadou Bah**

Termination Date: **September 19, 2018**

Reason for Termination:

- | | |
|---|--|
| <input type="checkbox"/> Voluntary Resignation | <input type="checkbox"/> Job Abandonment |
| <input type="checkbox"/> Insubordination | <input type="checkbox"/> Permanent/Temporary Layoff |
| <input checked="" type="checkbox"/> Policy Violation | <input type="checkbox"/> Unacceptable Work Performance |

Explanation for Dismissal: **Amadou got into a physical altercation with a co-worker on Tuesday, September 18, 2018. After viewing the incident on the camera, it is apparent that Amadou physically hit/punched the other co-worker. This behavior is unprofessional and unacceptable and cannot be tolerated. The company also has a Zero-Tolerance Policy against any Employee Abuse which includes Mistreatment of Others, Verbal/Physical Abuse or any sort of Harassment.**

Is this Employee Eligible for Rehire: Yes **No**

Employee Signature: Refused to sign Date: 9-19-18

Manager Signature: Louie Lousar Date: 9-19-18