

Termination of Employment

EXIT FORM

Name of Employee Saime Favila Today's Date 11/28/17

Last Day worked 11/16/17

Quit, to pursue other opportunities [Signature]
Employee Initial

Laid off _____
Employee Initial

Other _____

Final pay _____
To include worked hours for current pay period and accrued but unused PTO

Eligible for rehire _____ Yes No

The following items have been turned in:

Truck	<input checked="" type="checkbox"/>	
Keys	<input checked="" type="checkbox"/>	
Tools	<input checked="" type="checkbox"/>	
Supplies	<input checked="" type="checkbox"/>	
Uniforms	<input checked="" type="checkbox"/>	
Cell Phone	<input checked="" type="checkbox"/>	tablet
Other	<input checked="" type="checkbox"/>	Storage keys and entrance cards

Receipt of a fully executed copy is acknowledgement of this termination notice.

Signed _____
Employee Saime Favila

Final paycheck will be mailed to the address we have on file.

Signed _____
Employer [Signature]