



Separation Report

Employee Name: Terry Welsh
Client Company: _____ Separation Date 5/7/14

Reason for Separation or Refusal

(Please check one of the following)

Voluntary (Resignation, Job Abandonment, etc.)

- Attach Letter of Resignation (if available)
- Date employee quit on ____/____/____
- Was there full time work for the employee when he/she quit? ____ Yes ____ No
- Please give a detailed explanation of the circumstances, including any statements made by the employee at the time of separation. (Complete Explanation of Separation below.)

Involuntary (Layoff, Company Termination, Death, etc.)

- Attach Warnings (if available)
- Discharged for misconduct connected with work on ____/____/____
- Describe what the worker did or failed to do which caused the discharge. Explain the specific act of misconduct; avoid general terms like "absenteeism", "violation of rules"; tell what rule was violated and why, how often absent, etc. (Complete Explanation of Separation below.)
- The worker was terminated for unsatisfactory job performance. (Complete Explanation of Separation below.)

Explanation of Separation: (use additional sheets if necessary)

Has missed 15 days of work since Jan 1, 2014
The following dates: 2/3, 2/4, 3/12, 4/4, 4/7, 4/8, 4/9, 4/14, 4/15
4/17, 4/18, 5/5, 5/6, 5/7. No call or show 5/7

Dates of Employment: _____ to _____

Starting Position: _____

Ending Position: _____

Supervisor's Notes: Safety bag was retrieved from his truck and turned in

I certify my statements are true and correct.

Supervisor's Signature: [Signature] Date: 5/7/14



Corporate Management Group
 12000 N. Washington St. Ste. 290
 Thornton, CO 80241
 Office – (303) 920-1425
 Fax – (303) 737-7767
 Contact Name: Tina Krol

Termination of Employment

Terry Welsh _____ Today's Date _____
 Name of Employee

Last Day worked _____

Quit _____ Laid off _____ Terminated _____
 Employee Initial Employee Initial Employee Initial

Failure to report to work _____ Other _____
 Employee Initial Employee Initial

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		
Keys		
Tools		
Supplies	/	
Uniforms		
Cell Phone	/	
Other		

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

Signed _____
 Employee

Signed _____
 Employer