**Logo

Description automatically generatedEmployee Termination Form**

**Instructions:** Supervisors, please complete the Employee Termination Form and email to [qti-hrmailbox@tandemhr.com](mailto:qti-hrmailbox@tandemhr.com) or fax 608-259-6304 prior to the employee’s last day.

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| **Employee Name:** | **Termination Date:** | **Last Day of Employment:** |
| **Company Name:** | **Termination Form Completed By:** | |

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| --- | --- |
| **Termination Information:** | |
| **Reason:** (add drop down list) | Resignation Letter Received/Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Comments:** | |

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| **Separation Payout Information:** |

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| **If known, indicate whether or not the following should be paid out for this employee…** | | | **Verified by Tandem HR** |
| **Paid Time / Earned Time Off** | Yes  No | \_\_\_\_\_ hours | Yes Initials: \_\_\_\_\_\_\_ |
| **Vacation** | Yes  No | \_\_\_\_\_ hours | Yes Initials: \_\_\_\_\_\_\_ |
| **Sick Time** | Yes  No | \_\_\_\_\_ hours | Yes Initials: \_\_\_\_\_\_\_ |
| **Other Time Off:** | Yes  No | \_\_\_\_\_ hours | Yes Initials: \_\_\_\_\_\_\_ |
| **Severance** | Yes  No | See agreement for details | Yes Initials: \_\_\_\_\_\_\_ |
| **Wages in Lieu of Notice** | Yes  No | \_\_\_\_\_ hours or $ \_\_\_\_\_\_\_ | Yes Initials: \_\_\_\_\_\_\_ |

List any special instructions below. Note: Tandem HR will pay the employee’s wages until their last day of employment unless otherwise noted.

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| **Special Instructions for Tandem HR:** |

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| **Documentation Attached:** | | | | |
| Resignation letter (if applicable)  Documentation that clarifies and supports the termination decision (i.e. written warnings, PIP, incident notes, dates, etc.)  Severance and/or Separation Agreement  No documentation attached | | | | |
| **Supervisor Signature:** |  |  | **Date:** |  |

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| **QTI HR INTERNAL USE ONLY:** |
| **Comments**: (i.e. separation agreement, rehireability, unemployment insurance information, etc.) |