

Termination of Student Employment

Employee Information	
Name:	Banner ID:
Department:	Last Working Date:
Position/Duties:	
Reason for Termination	
Voluntary Resignation Accepted another job Relocated Transferred/Graduating Job Dissatisfaction Disability Course Load too Heavy Other (Explain)	Involuntary Termination Attendance/PunctualityMisconduct/AttitudePoor Job PerformanceInsubordinationLack of Available WorkEarned Award/Lack of FundsMutual AgreementFailed to Report to WorkLess than 6.0 UnitsDrug/Alcohol UseOther (Explain)
Explain:	
Two-Week's Notice	
Did student give two-week's notice?	Yes No
Did student quit without contacting you	r department? Yes No
Rehire Status	
Would you rehire student? Yes N	No
Please give explanation:	
Supervisor's Signature	Print Name Date