

**Human Resources Division**

Benefits Office  
7 East 12<sup>th</sup> Street, 2<sup>nd</sup> Floor  
New York, NY 10003-4475

## Supervisor's Report on Employee Separation

[Consult "The Supervisor's Role in Unemployment Insurance Administration" for detailed guidelines]

Employee's Name \_\_\_\_\_ Employment Date \_\_\_\_\_ Effective Date of Separation \_\_\_\_\_  
Actual Last Day Worked \_\_\_\_\_ School/Div. \_\_\_\_\_ Dept. \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Extension \_\_\_\_\_

### Cause of Separation

1. **Voluntary Separation** (Attach letter of resignation. Indicate reason for resignation if not specified in letter.)

Was Leave of Absence requested? \_\_\_\_\_

2. **Involuntary Separation:**

Not Qualified (Explain)

Attendance/Punctuality (Indicate dates absent/late within 6 months prior to separation and excuses given by employee).

Misconduct (Give incident(s), date(s), witness(es), etc.)

Layoff (Reason) \_\_\_\_\_

Other \_\_\_\_\_

a) WARNINGS (Indicate dates of all verbal warnings. Include copies of all written warnings.)

b) What attempts were made to solve the problem? Was transfer discussed?

c) Is separation being grieved or challenged in any formal proceedings? \_\_\_\_\_

If Yes, explain \_\_\_\_\_

3. **In Your Opinion:** Would you rehire this employee or recommend for employment elsewhere in the University? \_\_\_\_\_

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Human Resources Representative's Signature

\_\_\_\_\_  
Date