

Employee Change Notice (ECN) – Separation of Employment

To Be Completed By Supervisor / Manager

Employee Name: _____ Location/Project/Site: _____

Position: _____ Last Date Worked: _____

Eligible for rehire? Yes No **If No, explain:** _____

REASON FOR SEPARATION:

VOLUNTARY: Resignation letter received: Yes No

- Accepted New Job Quit No Notice / Abandoned Position No Return from LOA Working Conditions/Schedule
 Return to School Retirement Personal Transfer to : _____

INVOLUNTARY: Approvals Received? Yes No

- Reviewed with Human Resources
 Approved by Manager
 Supporting Documentation on File (ie: Evaluation, Coaching & Counseling Form, PIN, etc.)
 Final Timecard Signed/Processed

- Unable to Meet Job Requirements Violation of Company Policy: _____
 Reorganization / Position Discontinued Project Ended / Funding Ended Reduction In Force / Lack of Work
 Deceased

Please also submit the following:

- Exit Checklist to HR
 Final timecard to Payroll

Supervisor Signature

Date

***HR & Payroll Use Only**

- | | |
|---|---|
| <input type="checkbox"/> Entered in HRO
Term Date: _____ | <input type="checkbox"/> Sent to Payroll
<input type="checkbox"/> Sent to 401K Rep |
| <input type="checkbox"/> Sent to Benefits Rep
Benefits End Date: _____ | <input type="checkbox"/> Final Live Check
<input type="checkbox"/> Voluntary Exit Survey |
| Email Corporate: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |