



EMPLOYMENT SEPARATION FORM

Employee Name:

Client Name:

Last Date Employee Worked:

Employment status: Is the employee currently working for you? Yes No

Did the employee quit? Yes No

Was the employee fired? Reason:

Was the employee suspended? Reason:

Is the employee on a leave of absence; paid or unpaid?

Did the employee refuse or not respond to an offer of reemployment?

Is the employee unavailable for employment i.e. vacation, sick leave or other employment?

Was the employee suspected of fraudulent activity?

Describe the situation and events leading up to it.

** CDI will need you to promptly follow up questions as further details may be requested by the unemployment office. If there is a phone hearing, it will be your responsibility to attend with us and answer the questions asked of you. **

Managing Party Signature

Date