|  |  |
| --- | --- |
| Employee’s Name: |  |
| Parish/Location: |  |
| Date Notice was given |  | Last day of employment: |  |
| Termination  | Expiry of fixed Term € Yes € No | Employer Initiated € Employee Initiated €  |
|  Was the person completing a traineeship? | If yes please give details of RTO and Traineeship Coordinator |
| Is a Letter of Resignation attached: | € Yes € No NB: A resignation is required for full & part time employees Where Employer initiated, attached copy of correspondence |
| Was the required notice provided? | € Yes Pay all entitlements€ No Seek advice from Registry |
| Additional information: | Is a Separation Certificate required? € Yes € NoIs a Statement of Hours requested? € Yes € No |
| € **Voluntary or Employee Initiated Cessation OR** (and choose one reason from below) € Accepted external position € Relocating /moving away € Family commitments € Health reasons € Retirement € Deceased € Visa expiry / conditions not met € Left without notice / abandonment € Other | € **Involuntary or Employer Initiated Cessation**(seek advice from Registry prior to actioning ) (and choose one reason from below) € Gross Misconduct € Dismissed for performance reasons € Mandatory checks unsatisfactory € Dismissal during probation € Redundancy € Contract expired € Funding ceased € Shortage of Work € Other |
| Additional Notes/Comments: |   |
| Forwarding Contact Details |  |
| **\*\*\* NOTE: Complete a separate Employee Exit Checklist \*\*\*****to acknowledge all property returned** |
| Parish Representative’sName (print): |  | Parish Representative’s |  |
| Parish Representative’s Signature: |  | Date: |  |
| **Payroll Use Only** |
| Statement of Termination payment € Yes € No Payment Summary sent € Yes € No |