**Termination Notice Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name:** |  | | |
| **Address:** |  | | |
| **Contact Number:** |  | **Email:** |  |

**Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Name |  | | |
| Employee ID |  | Department: |  |
| Position/Job Title |  | Date of Joining | \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ |
| Supervisor/Manager |  | | |

**Termination Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Termination Type | ☐ Voluntary ☐ Involuntary ☐ Redundancy ☐ Misconduct ☐ Contract End ☐ Other: \_\_\_\_\_\_\_\_\_\_ | | |
| Effective Termination Date | \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ | Notice Period (if applicable) | \_\_\_\_\_\_\_\_\_\_ days |
| Last Working Day | \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ | | |
| Reason for Termination |  | | |
| Reference to Prior Warnings/Notices | ☐ Yes ☐ No (If yes, attach copies) | | |

**Final Settlement & Clearance**

|  |  |  |
| --- | --- | --- |
| **Description** | **Amount/Status** | **Remarks** |
| Salary up to Last Working Day |  |  |
| Leave Encashment |  |  |
| Gratuity/Severance Pay | \_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_ |
| Deductions (if any) |  |  |
| Total Payable |  |  |
| Clearance from All Departments | ☐ Completed ☐ Pending |  |

**Company Property Returned**

|  |  |  |
| --- | --- | --- |
| **Item Description** | **Returned (✔)** | **Remarks** |
| ID Card | ☐ |  |
| Laptop/Computer | ☐ |  |
| Keys/Access Card | ☐ |  |
| Uniform/Equipment | ☐ |  |
| Documents/Files | ☐ |  |

**Authorization**

|  |  |  |
| --- | --- | --- |
| **Supervisor/Manager Name:** |  | |
| **Signature:** |  | **Date:** |
| **HR Manager Name:** |  | |
| **Signature:** |  | **Date:** |

**Employee Acknowledgment**

I, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, acknowledge receipt of this termination notice and confirm that the above information has been explained to me.

**Employee Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_

**Company Stamp & Authorization**

**Authorized Signatory:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Designation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_  
**Official Stamp:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_