

Termination/Exit Details

Terminating Emp Name _____ Emp. # _____ St. _____

Interviewed/Hired by _____ 2nd Interview Score _____

Hire Date _____ Last Day Worked _____ Termination Date _____

Reason for Leaving

POOR PERFORMANCE	NOT THE RIGHTJOB FIT	OTHER
<input type="checkbox"/> Attendance	<input type="checkbox"/> Benefits	<input type="checkbox"/> Health
<input type="checkbox"/> Conflict with manager/employees	<input type="checkbox"/> Commute	<input type="checkbox"/> Moved/Relocation
<input type="checkbox"/> Insubordination	<input type="checkbox"/> Career/ career change	<input type="checkbox"/> Family and/or personal reasons
<input type="checkbox"/> Intoxicant/Alcohol	<input type="checkbox"/> Higher pay	<input type="checkbox"/> Other – Explain below
<input type="checkbox"/> Misconduct (provide details)	<input type="checkbox"/> Job abandonment/Walked off job	
<input type="checkbox"/> Mutual Agreement	<input type="checkbox"/> Attend school	
<input type="checkbox"/> Performance	<input type="checkbox"/> Transportation	
<input type="checkbox"/> Policy Violation	<input type="checkbox"/> Seeking other employment	

▪ If leaving for another job, school, or relocation, note the name of the new employer, school/university and/or the city/location. _____

▪ When will the new job or school start? Provide a start date and the new rate of pay, if applicable.

Why did the associate not work out? Check one below.

- ☐ **Poor Hire** Not suited for the job.
- ☐ **Good Hire** Not trained or properly developed.
- ☐ **Good Hire** Trained and developed properly, but extenuating circumstances prevented the associate from continuing their employment.

Please provide details regarding the termination as it relates to your selection. Address what actions or changes are being taken to ensure this does not happen again.

Would you rehire this associate? ☐ YES ☐ NO

Store Manager Signature & Date District Manager Signature and Date

STORE MANAGER – PLEASE COMPLETE AND SUBMIT WITH A CHANGE OF STATUS FOR ALL TERMINATIONS