Employee Termination Notice Form

With Warning History

Employee Name: [_____]

Employee ID: [_____]

Department: [_____]

Position: [_____]

Date of Notice: [_____]

Termination Effective Date: [_____]

Reason(s) for Termination:

[   ]

Warning/Disciplinary History

Date	Type of Warning	Description	Issued By
[_____]	Select ▼	[_____]	[_____]
[_____]	Select ▼	[_____]	[_____]
[_____]	Select ▼	[_____]	[_____]

Additional Comments:

[   ]

Manager/Supervisor Signature: [_____] **Date:** [_____]

HR Representative Signature: [_____] **Date:** [_____]

This form is used to document and communicate employee termination decisions, including all relevant warnings and disciplinary actions, to ensure procedural fairness and compliance with company policy.