



# Employment Termination Form



"A partner in the Smart Start network"

"Building Brighter Futures"

**TO BE COMPLETED BY YOUR EMPLOYER:**

\_\_\_\_\_ participates in the Child Care Subsidy Scholarship Program of Wilson Smart Start.  
**Name of Employee (Worker)** The following information is needed in order to document the applicant's income/employment.

Please complete the following information and return to the address shown below by: \_\_\_\_\_.

Social Security # or ITIN #: \_\_\_\_\_ Termination date of employment: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Reason for Termination:** (Please check one)

**VOLUNTARY RESIGNATION**

- \_\_\_\_ Secured better position
- \_\_\_\_ Dissatisfied (type of work)
- \_\_\_\_ Dissatisfied (salary)
- \_\_\_\_ Dissatisfied (supervisor)
- \_\_\_\_ Dissatisfied (working conditions)
- \_\_\_\_ Generally dissatisfied
- \_\_\_\_ Retirement
- \_\_\_\_ Returned to school
- \_\_\_\_ Moving out of area
- \_\_\_\_ Family or personal circumstances
- \_\_\_\_ In Lieu of Discharge
- \_\_\_\_ No Reason Given

**INVOLUNTARY TERMINATION**

- \_\_\_\_ Absenteeism or Tardiness
- \_\_\_\_ Failure to Meet Performance Expectations
- \_\_\_\_ Insubordination
- \_\_\_\_ Not qualified for the position
- \_\_\_\_ Gross Misconduct
- \_\_\_\_ Dishonesty or Theft
- \_\_\_\_ Job abandonment
- \_\_\_\_ Death
- \_\_\_\_ Other

**LAY OFF**

- \_\_\_\_ Lack of Work
- \_\_\_\_ Job Eliminated

Eligible for Re-hire?      \_\_\_\_ Yes      \_\_\_\_ No, Explain: \_\_\_\_\_

**Contact information for the person completing this form:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Email: \_\_\_\_\_

I verify that all the information contained in this Employment Termination Form is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Thank you in advance for completing this form. If you have any questions, please contact Wilson Smart Start at 252-206-4235. You may submit this completed form by fax at (252) 206-4245, by email at [Charlene.lucas@Wilsonpfc.org](mailto:Charlene.lucas@Wilsonpfc.org), or by outside dropbox at 109 Park Avenue West, Wilson, NC 27893  
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