



Separation Form

SUPERVISOR:

- 1) Please complete this section and submit to Human Resources as soon as you receive notice from the employee.
- 2) If the employee provided written notice or correspondence regarding their separation, please attach a copy to this form.
- 3) Download the Employee Offboarding Checklist from the Human Resources website.

Employee Type: MID Employee EDUStaff Employee Other

Name: _____ Effective Date of Separation (last day): _____

Reason for Separation: _____ Details: _____

If the employee has more than one position, is this a complete separation from all positions at Mid?

Yes, separate the employee from all positions.

No, separate only position(s) listed below and keep other position(s) active.

If we are only separating positions, please provide the position title(s) below.

Position(s) to be separated: _____

The rating of this employee's work performance:

Outstanding Above Average Met Standards Below Standards

Would you re-hire this employee? Yes No

Comments:

Supervisor Signature: _____ Date: _____

HUMAN RESOURCES:

Signature of HR representative form received by: _____ Date: _____

Exit survey sent: Yes No Date: _____

HelpDesk Ticket submitted: Yes No Date: _____

Tuition Benefit Used Yes No If Yes, notify Director of Accounting ASAP to process calculation