



Job Separation/Termination Form
The University of the Arts
Work Study Program

Student Name: _____ **Student ID #:** _____

Student Job Title: _____

Department: _____ **Department #:** _____

Supervisor: _____ **Supervisor Phone Number:** _____

Last Date of Employment: _____

Part I: Voluntary Separation

The student has decided to resign from the above position due to the following reason(s):

- Position eliminated. Date: _____
- Student has never shown up for work. Date: _____
- Job Dissatisfaction (Attach Resignation Letter). Date: _____
- Found New Campus Job (Attach Resignation Letter). Date: _____
- Other: _____ Date: _____

Part II: Termination

The student has been terminated from the above position due to the following reason(s):

- Poor Performance. Date: _____
- Behavioral Misconduct. Date: _____
- Poor Attendance. Date: _____
- Falsification of time worked reported on timesheet. Date: _____
- Violation of University Policies. Date: _____
- Other: _____ Date: _____

Discipline Procedures

In compliance with the termination policies set forth in the *2014-15 Student Employee Handbook and Supervisor's Manual*:

- Verbal Warning(s) was given. Date(s): _____
- A Written Statement was issued (Attach Copy of Statement.) Date: _____
- Job Separation/Termination Form was completed. Date: _____
- Other: _____ Date: _____

Part III: Authorized Signatures

I/We certify that the terms of this separation/termination of employment have been discussed and the proper steps have been taken and appropriate documentation is attached. **Return a copy of this form to the Student Employment Coordinator in Student Financial Services.**

Employee's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____