

Employee Separation Notice & Exit Interview Report (SF-14R)

(Submit copy to Human Resources and to ITS Director)

Date: Budget Unit Head: Budget Unit Title:

Employee: Position Title: CWID

Computer User ID Separation Date: Last Work Day:

Please accept my (resignation, retirement, etc.) at the close of business (date).

Reason(s) for Separation: Please mark those that apply.

Work Satisfaction: Incentives

- 1. Insufficient pay
2. Better job (private industry)
3. Lack of promotional opportunities
4. Job security
5. Work not interesting

Movement Within State Government

- 12. To accept new probational appointment
13. To accept classified/unclassified appointment
14. Transfer out (lateral, promotion, demotion to another agency)

Relations with Personnel

- 17. Fellow employees
18. Supervisor
Work Conditions
19. Shift work
20. Excessive work
21. Insufficient work
22. Physical condition of work

Living Environment

- 23. Transportation
24. Housing facilities
25. Living Costs
26. Locality
27. Reasons unknown
28. Home responsibilities
29. Business responsibilities
30. Other

Personal Reasons

- 6. Poor health
7. Maternity
8. Moving to another area
9. Educational
10. Military service
11. Transfer

Retirement

- 15. Disability
16. Regular

Unemployment Insurance Information

- 31. I have another position/job
32. I do not have another position/job

Other:

Employee signature: Date:

If applicable, all state cards must be recovered before employee separates from the University.

Does the employee possess a LaCarte card (P-Card)? Yes or No (please circle). If yes, please note date of recovery:

Does the employee possess a Travel card (T-Card)? Yes or No (please circle). If yes, please note the date of recovery:

Supervisor and Budget Unit/Division Head or Vice-President Section

If voluntary, check the item below which indicates the type of voluntary separation:

Involuntary

- Resignation, Retirement (disability), Retirement (optional), Transfer, Separation (military), Termination, Completing temporary appointment, Layoff, Removal for Cause, Retirement (age), Termination of appointment, Separation (probationary)

Supervisor:

How long have you supervised the employee? Comments concerning employee's separation:

Supervisor's signature: Date:

Budget Unit Head:

Comments regarding employee's separation:

Budget Unit/Division Head's signature: Date:

Vice-President:

Comments regarding employee's separation:

Vice-President's signature: Date:

To be completed by Human Resources :

Employee's Years of State Service NSU Other Total Employee's Date of Birth:

In connection with separation, someone has reviewed and provided relevant information concerning the following subjects to the employee. (Check all that apply)

- Leave, Termination pay, Group life Insurance, COBRA, Group Hospitalization, Payroll Deductions, Rights of employee leaving for military service, Retirement, Re-employment, Other (list)

This is to certify the above listed information has been explained, and I fully understand my responsibilities.

by/for Human Resources Date

cc: Appropriate Dean/Division Head, Vice-President, ITS

Employee

Date