

Notice of Separation

To Be Completed by Department				
USC ID:		Name: (Last, First, Middle)		
Class/Slot:		Title:		Position No.:
Department Name:				Dept. No.:
Last Day Worked:			TERI Participant: Yes No	
Is the employee a foreign national? Yes No		Will this position be retained following this separation? Yes No		
If RGP/TL, will annual leave be paid out? Yes No				
Forwarding Address:				
Forwarding E-mail Address:				
Reason for Separation (Check only one item)				
(01) Personal				
(02) Different Job – Same State Agency				
(03) Transfer to Another State Agency		Name of Agency:		
(04) Employed Outside State Gov't		(05) Relocating	(06) Returned to School	
(07) Military Service		(08) Full Retirement	(09) Early Retirement	
(10) Disability Retirement		(11) Never Reported for Work	(12) Did Not Return from LWOP	
(13) Declined Job Offer		(19) Termination/Position Uncovered	(20) End of Temp Contract	
(21) Reduction in Force (RIF)		(22) Job Eliminated	(23) Misconduct	
(24) Substandard Performance		(25) Failure to Update Credentials	(27) Deceased	
(28) RIF Demotion		(29) RIF Reassignment		
Accounting Information (Attach additional sheets for accounting if needed)				
Dept.	Fund	Obj. Class	Analytical	Payroll Use Only
Signatures			Dates	
Employee:				
Supervisor:				
Salary Administration:				
Payroll:				
To Be Completed by Division of Human Resources/Payroll				
Payroll Notes:				
Base Salary:		Supplement:		Total Compensation:
Annual Leave Hours Balance:		Semi-Amount:		Basis:
Sick Leave Hours Balance:		Hours/Week:		OR: \$ (+ / -)
Annual Leave Payout Calculation:				