



CLIENT ID # 481/482

Employee Exit Checklist

MANAGERS – THIS FORM MUST BE SENT TO YOUR REGIONAL MANAGER ON DAY OF OCCURRENCE
REGIONAL MANAGERS – REVIEW, VERIFY, ENDORSE & FORWARD TO SYNDEO WITHIN 24 HOURS

Date: _____ Store #: _____ Manager Name: _____

Exiting Employee Name: _____

Type of Termination

Voluntary *Please attach Letter of Resignation*

Involuntary *Please indicate reason for involuntary termination and attach supporting documentation*
 Performance Insubordination Attendance Theft Harassment Workplace Violence Safety Violation

Retirement

Abandonment

Was corrective action taken by manager? YES NO
(Must attach signed "Employee Warning Notice" and supporting documents)

Two Week Notice Given? YES NO

Is Employee eligible for re-hire? YES NO
(Please attach supporting documentation)

Last Day Worked _____

Final Check Date _____

Does Employee have an open A/R account? YES NO
 If YES, dollar amount owed to NKC? \$ _____
(Any open A/R account with monies owed to NKC, will be deducted from final check)

Was Employee issued company uniforms? YES NO
 If YES, are all uniforms accounted for? YES NO
 If NO, what is the dollar amount of missing uniforms? \$ _____
(Call uniform company to determine amount to be deducted from final check)

Did the Employee have a company email address (@nktiregroup.com)? YES NO

Has Employee returned all company property? YES NO
(Examples: Company Vehicle, Cell Phone, Computer, Credit Card, Store Keys)
 If NO, what does the Employee still have possession of? _____

Employee Contact Info: Cell Phone #: _____ Email: _____

Manager Signature _____

Date Forwarded to Regional Manager _____

Regional Manager Signature _____

Date Regional Manager Received From Manager _____

Date Regional Manager Forwarded to Syndeo _____