

TERMINATION NOTICE

From

Date _____, 20____

RE: OFFICIAL NOTICE OF TERMINATION

Dear _____,

This letter is to inform you that your employment from _____ will end as of _____, 20____.

You have been terminated for the following reason(s): _____

This decision is not reversible.

a.) **Severance.** Your termination shall: (check one)

- Not receive severance.

- Receive severance in the following manner: _____

b.) **Health Benefits.** Your health care benefits shall: _____

c.) **Company Property.** The following company property must be returned: _____

d.) **NDA.** You will be required to follow any non-compete, non-solicitation, and/or non-disclosure restrictions as stated in your employment contract (if any).

If you have questions about policies you have signed, your compensation, benefits, or returning company property, please contact at any time.

Sincerely,

Phone: (____) ____ - ____

E-Mail: _____