

# Termination A.V.O Livonia Chrysler

Employee Name: \_\_\_\_\_

Department: \_\_\_\_\_

Termination Date: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Reason for Termination:

\_\_\_\_\_  
\_\_\_\_\_

Approved by Livonia Chrysler Jeep Inc Corporate Officer(s)? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Special Conditions

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Last Day Worked: \_\_\_\_\_

Assigned Employee Number: \_\_\_\_\_

Kill Logins: (Circle for YES)?

MPK /Email /Phone Sys/ Alarm

Manager X\_\_\_\_\_

Corp. Officer X\_\_\_\_\_

Date \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Date \_\_\_\_ - \_\_\_\_ - \_\_\_\_