



ADJUNCT SEPARATION FORM

Please complete this form for adjunct instructors who will not be teaching for ECC. This form should be completed on the last day of employment.

Employee's Name _____

Today's Date _____

Department _____

Last Day of Employment _____

Reason from Separation:

- ☐ Resignation, not available to teach
- ☐ Resignation, moving out of area
- ☐ Termination, unsatisfactory performance _____
- ☐ Termination, no courses available _____
- ☐ Other, please explain _____

Rehire Status:

- ☐ Yes
- ☐ Conditional, list reason _____
- ☐ No, list reason _____

College property returned:

- ☐ Yes
- ☐ No, list items outstanding _____

Signatures:

Division Chair / Date

Vice President of Instruction / Date

Return completed form to Human Resources