



EMPLOYEE EXIT FORM

**NAME OF
EMPLOYEE:** FRANKLINE .O.
OGADA

ID NO: 28097162

PAYROLL NO: SIL/063

JOINING DATE: 09-09-2014

DEPARTMENT: MANAGEMENT

DESIGNATION

DATE OF EXIT/TERMINATION/DISMISSAL: 26-05-2017

Please be advised that the above employee has ceased being an employee of with effect from the above date.

NATURE OF EXIT/TERMINATION

Initated By (HOD).....

Approved By

Initated By (HOD).....