

EMPLOYEE EXIT FORM

NAME OF EMPLOYEE: TEST
ACCOUNT

ID NO:

PAYROLL NO: 0131

JOINING DATE: 01-01-1970

DEPARTMENT:

DESIGNATION

DATE OF EXIT/TERMINATION/DISMISSAL: 04-02-2019

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).....