

Note: Please download and save the form locally before completing.

### EMPLOYEE INFORMATION

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ UPI #: \_\_\_\_\_  
CURRENT RANK: \_\_\_\_\_ PRIMARY DEPARTMENT: \_\_\_\_\_

### TERMINATION REASON

Effective Date: \_\_\_\_\_

Select specific reason: [check one box]

**Deceased**

**Declined Offer**

**Resigned**

Reason for leaving: \_\_\_\_\_

Provide Institution if known: \_\_\_\_\_

**Retirement**

*Is this faculty member eligible to become Emeritus/a?*

For eligibility criteria, refer to Faculty Handbook, section XIX.A: <http://provost.yale.edu/faculty-handbook>

YES NO

**Term Ended**

If the final month's pay should not be a full month's salary, please provide the prorated final month's salary amount here: \_\_\_\_\_

### PREPARER INFORMATION

Prepared by: \_\_\_\_\_ Dept: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

### AUTHORIZATIONS

(Signature/Date)

(Signature/Date)

Primary dept/school: \_\_\_\_\_

3rd dept/school: \_\_\_\_\_

2nd dept/school: \_\_\_\_\_

Cognizant Provost: \_\_\_\_\_

### OFAS use only

Notes: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Entered by: \_\_\_\_\_  
Name Date Name Date