

Blue Ridge Community and Technical College Student Employee Separation Form

Name of Student Employee: _____

Position: _____

Department: _____ Supervisor: _____

Dates of Employment: from _____ to _____

Reason for separation:

_____ Resignation from Student Employee

_____ Termination by Supervisor

_____ Other: _____

Explanation of actions: _____

Please attach history of disciplinary actions if separation is a termination.

Eligible for Rehire:

_____ Yes

_____ No

Signature of Supervisor: _____ Date: _____

Printed name of Supervisor: _____