



ESCHires | ESF Employment Separation Form

All hiring and employment forms must be submitted to the ESC **ten business days** in advance of the effective date of employment or change. Late forms may result in delayed processing or payment.

Employment Separation Forms (ESFs) are not intended to be used for employer initiated terminations or a reduction in force. For these situations please contact the ESC Office of Human Resources.

You may need to have the following documents ready in order to submit this form:

- (1) Resignation Letter - If such notice was provided
- (2) Pay Calendar - If the full contract year was not completed

1.1 Employee Information

Full Legal Name:

First: Phone:
Middle: Personal E-Mail:
Last:

Home Address:

Street:
City:
State: OHIO
Zip:

1.2 Separation Information

This form is being submitted due to a: ☐ Resignation ☐ Retirement

Last Scheduled Day:

This includes payment for work performed up to and including the last day worked or payment for paid leave and paid holidays.

Has the employee completed the current contract period for the position from which they are separating?
☐ Yes ☐ No

Do you have a copy of the resignation letter? ☐ Yes ☐ No

Hiring Entity Name:

Position Information

General Position Category: Select General Position
Specific Position Title:

Special Instructions

(Please include any additional information ESC HR may require to process this separation)

1.3 Additional Documentation

(Please attach any additional documentation ESC HR may require to process this separation, e.g. Resignation Letter or Pay Calendar)

Filename	Description	Notes
No file attached	<input type="text"/>	<input type="text"/>

1.4 Signature

☐ By checking this box and clicking on "Click Here to Sign," I am indicating that I am authorized by the hiring entity named on this form in the *Position Information* section to process the separation for the individual named in the *Employee Information* section and the Educational Service Center of Central Ohio (ESC) or the ESC Council of Governments (COG).

You acknowledge that by signing below, you are indicating your intent to sign the relevant document or record and that this shall constitute your signature.

Hiring Manager : Date:

1.5 Office use Only

(To be completed by ESC Human Resources)

Employer (choose one): ☐ ESC of Central Ohio ☐ ESC Council of Governments

Employee Status:

1.6 HR Special Notes:

1.7 Approval Section

1.9 Cancellation Section

Click Here to initiate ESF cancellation ☐

If you have any questions when completing this form please contact Human Resources at 614.445.3750 or e-mail humanresources@escoco.org