

DOUGLAS, LEONARD & GARVEY, P.C.

NEW HAMPSHIRE SEVERANCE AGREEMENT CHECKLIST

I. GENERAL INFORMATION

Your Name _____ Date of Birth: _____

Address _____

Home Phone Number _____ Work Phone Number: _____

Marital Status: _____

E-Mail Address: _____

Your Social Security Number: _____

Current Employer: _____

Work Address: _____

Length of Time With Employer: _____

II. EMPLOYER

Your Job Title _____

Date You Were Hired _____

Your Salary/Pay _____

Did you have an Employment Contract? _____

Did you sign a Non-Compete Agreement during your employment? _____

If so, when did you sign it? _____

Name of Your Supervisor(s) _____

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Were you provided an Employee Handbook or Manual? _____

If so, do you have a copy? _____

III. TERMINATION/RESIGNATION (if applicable)

How were you notified of your termination? _____

Who informed you that you were terminated? _____

Describe the facts of your termination:

What was the reason given to you for your termination?

What do you believe is the reason for your termination?

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Prior to your termination/resignation, had you made any complaints or Reports to your supervisor or anyone at your employer about any matters connected or related to your termination?

What is your performance history (include any prior reprimands or Disciplinary action as well as your reviews or evaluations?)

Do you have copies of your reviews or evaluations? _____

Do you have a copy of your personnel file? ____ If not, have you requested a copy of your personnel file?

IV. DAMAGES

Describe your Employment After Your termination/resignation:

<u>After:</u>	Dates	Position	Earnings	Rate of Pay
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Have you applied for Unemployment Benefits since your termination/resignation? _____

Did you receive Unemployment Benefits? _____

Did your former employer object to your receiving Unemployment Benefits? _____

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What reason did you state to the Department of Employment Security
For your Termination/Resignation at the time you applied for
Unemployment Benefits?

Return to:

Douglas, Leonard & Garvey, P.C.

6 Loudon Road, Suite 502

Concord, NH 03301

www.nhlawoffice.com

DOUGLAS, LEONARD & GARVEY, P.C.

6 Loudon Road, Suite 502, Concord, NH 03301

(603) 224-1988 (800) 240-1988

www.nhlawoffice.com