

*To be used with Question 26*  
**FORM 26 / EMPLOYMENT TERMINATION**

Name \_\_\_\_\_  
*First Middle Last Suffix*

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone number \_\_\_\_\_

Name of supervisor \_\_\_\_\_

Employed From \_\_\_\_\_ Employed To \_\_\_\_\_

**Provide a Detailed Explanation:** This written statement should contain a description of the factual events and actions which led to this termination. The explanation should include your perspective of the circumstances, reasons, or situations that contributed to the termination disclosed. This includes any information or explanation which mitigates or lessens the severity of your actions or conduct and to illustrate rehabilitation. Attach a separate page(s) if necessary.

Detailed Explanation

**Duplicate this form as needed.**