

CHANGE IN EMPLOYMENT RELATIONSHIP NOTICE

Employee's Full Name

Social Security Number

Date of Termination

Last Day Worked

Your employment status has changed because of:

- ☐ Your voluntary resignation effective: _____
- ☐ Your resignation in lieu of termination effective: _____
- ☐ Your involuntary termination effective: _____
- ☐ Your unpaid leave of absence for _____
effective: _____.
- ☐ Other reason: _____

Employer's Name and Address:

Employer's Contact Person and Phone Number:

As per Section 1089 of the California Unemployment Insurance Code you may take this Notice to the Employment Development Department for application for Unemployment Insurance.