

Termination of Employment Due to Workforce Reduction

Date: [Insert Date]

[Employee's Name]

[Employee's Address]

[City, State, Zip Code]

Dear [Employee's Name],

We regret to inform you that due to a recent workforce reduction, your position at [Company Name] will be terminated effective [Last Working Day]. This decision was not made lightly, and we appreciate the contributions you have made during your time with us.

You will receive your final paycheck that includes any outstanding pay, as well as information regarding your benefits and options for COBRA continuation coverage.

We encourage you to reach out to [HR Contact/Department] for assistance regarding unemployment benefits and any other support we can provide during this transition.

Thank you for your dedication and hard work. We wish you all the best in your future endeavors.

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Address]