

[Company Name]
[Company Address]
[City, State, Zip Code]

[Date]

[Employee Name]
[Employee Address]
[City, State, Zip Code]

RE: Notice of Termination of Employment

Dear [Employee Name],

Please be advised that your employment with [Company Name] is terminated effective immediately, [Date].

This decision has been made following the incident on [Date of Incident], where it was determined that you were under the influence of [alcohol/illegal substances] while on duty. This conduct is a direct violation of our Company Code of Conduct and our Drug-Free Workplace Policy, which strictly prohibits the possession or use of intoxicating substances during working hours.

Your actions have been classified as gross misconduct, as they created a significant safety risk to yourself, your colleagues, and the company's operations.

Regarding your final compensation and benefits:

- Your final paycheck, including payment for hours worked up to today, will be [issued via direct deposit / mailed to your address] on [Date].
- [Mention status of accrued vacation/PTO if applicable per state law].
- Information regarding your health insurance benefits and COBRA eligibility will be sent to you under separate cover.

Please return all company property, including keys, ID badges, and electronic devices, to [Name/Department] by [Time/Date].

If you have questions regarding your final pay or benefits, please contact the Human Resources Department at [Phone Number].

Sincerely,

[Your Name]
[Your Title]
[Company Name]