

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

[Date]

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

Subject: Notice of Termination of Employment

Dear [Employee Name],

This letter serves as formal notification that your employment with [Company Name] is terminated for cause, effective [Effective Date].

This decision has been made following [mention specific incident, e.g., a positive drug/alcohol test result on Date / an investigation into your conduct on Date]. This behavior constitutes a direct violation of the company's Substance Abuse Policy, as outlined in the [Employee Handbook/Employment Agreement] which you signed on [Date of Signature].

As a result of this violation, your employment is being terminated for cause. Your final paycheck, which includes payment for work performed through [Last Day Worked] and [mention any accrued vacation time if applicable], will be [issued via mail / deposited into your account] on [Date].

Regarding your benefits:

- Your health insurance coverage will end on [Date]. You will receive separate information regarding COBRA enrollment.
- Information regarding your [401k/Pension] will be sent to you by the plan administrator.

Please return all company property, including [keys, badges, laptop, credit cards], by [Date/Time] to [Name/Department].

Should you have any questions regarding your final compensation or benefits, please contact [HR Contact Name] at [Phone Number].

Sincerely,

[Signature]

[Name of Manager/HR Representative]
[Title]