



HUMAN RESOURCES DEPARTMENT
4245 East Avenue
Rochester, NY 14618

585-389-2065 *phone*
585-389-2063 *fax*
www.naz.edu

NOTICE OF TERMINATION OF DOMESTIC PARTNERSHIP

I, _____, hereby notify Nazareth College that
Name of Employee

_____ and I are no longer domestic partners
Name of Domestic Partner

and I hereby cancel the Affidavit of Domestic Partnership as of _____
Date

I understand that it is my responsibility to provide a copy of this Termination Notice to the domestic partner named above within seven (7) calendar days from the date of this notice.

I understand that another Affidavit of Domestic Partnership, demonstrating eligibility for benefits, cannot be filed until one year after the date this Notice of Termination of Domestic Partnership is signed.

Signature of Employee Date

Social Security Number

Notary Seal and Signature

Date

TO BE COMPLETED BY HUMAN RESOURCES

Benefit End Date

Director of Human Resources

Date