

## National Insurance & Social Security Act, Cap. 47 TERMINATION OF SERVICES/LAYOFF CERTIFICATE

	OFFICIAL USE ONLY	
E		

Under Regulation 47 of the National Insurance and Social Security (Benefit)
Regulations PARTICULARS are to be completed by
Employer and given to Employee on date of termination

Termination
of Services

Where an employer terminates the employment of an employee or where the employee leaves the employment, the employer MUST give a Termination of Services/Lay-off Certificate to the employee and send a copy to the National Insurance Office within one week of the date of termination. An employee who wishes to claim Unemployment Benefit MUST submit the Certificate with his/her claim. A Termination of Services/Layoff Certificate must be given to the employee even if he/she was only employed for a day or part thereof.

OFFICIAL USE ONLY						

Penalty

Failure to provide the Employee with Termination of Services/Lay-off Certificate within one week of termination will result in a penalty.

Regulation 47(5) of the Benefit Regulations provides that the penalty is \$1,000 for failing to comply with the requirements, where the contravention continues or the failure continues after conviction, the penalty is \$1,000 together with a further \$200 for each day on which the offence is continued.

Termination refers to permanent separation i.e. the employee no longer works with the business. Self-termination refers to an employee who has resigned from the job while employee terminations refers to an employee who has been terminated by his/her employer.

## **EXAMPLE 1 Date of Termination**

Employer terminates John Brown on May 31st and pays him monies due, including holiday pay and payment in lieu of notice. In this case, date of termination is **May 31st**. (No NIS should be deducted from payment in lieu of notice). All wages **MUST** be reported in the week of termination for weekly paid employees and in the month of termination for monthly paid employees.

## **EXAMPLE 2 Date of Termination**

On May 31<sup>st</sup> employer gives John Brown one month's notice of termination, including salary for the month of June as well as holiday pay and any other monies due.

(John Brown is still employed but would not be required to report for work during June). In this case, **June 30<sup>th</sup>** is the date of termination. If the period notice is longer or shorter, the end of period date is the date of termination.

All wages **MUST** be reported in the week of termination for weekly paid employees and in the month of termination for monthly paid employees.

## **Provide Date of Termination in Section 3**

Section 1 - P	PERSONAL DETAILS OF EMPLOYEE	
National Insu	urance No. National Regist (Barbado	ration No.: s ID Card)
Last Name	First Name	Middle Name
Address _		
District _		Parish
Postal Code	Tel. No.	Cell No.
E-mail Addre	ess	
Section 2 - E	MPLOYER DETAILS	
Name of Employer		Employer's Registration No.
Address		
District		Parish
Postal Code	Tel. No.	Fax No.

Section 3 - EMPLOYMENT DETAILS							
Occupation	Date employment commence	ed	Year	Month	Day		
Position within organisation	Last day at wo	rk	rear	Month	Day		
		.,	Year	Month	Day		
Year Month Day	ay for which employee will be pa	aid	Year	Month	Day		
STATE REASON FOR UNEMPLOYMENT							
COMPLETE ONLY IF EMPLOYEE WAS LAID OFF							
Date of lay-off  Year Month Day	Expected date of re-employme	nt	Year	Month	Day		
Section 4 - OTHER DETAILS							
Is the employee receiving or entitled to a pension from employer	? Yes No						
If yes, give start date of pension  Ye	ar Month Day						
Was holiday pay given to employee who was laid off?	Yes N	o 🗌					
If holiday was given, state period:  From  Ye	ar Month Day		Year	Month	Day		
Amount of holiday pay							
Was the employee dismissed because of his/her own misconduct? Yes No							
If yes, explain the misconduct that occured.							
Did the employee voluntarily leave your employment?	Yes No						
Has the employee become unemployed because of stoppage of work		your wor	kplace? Ye	es N	lo 🔲		
If yes, state whether the employee is/was participating in a strike Give any other relevant details.	Yes No No						
Section 5 - DECLARATION							
I declare that the information given on this form is true to the best of my knowledge and belief.							
Signature of Employer	Date Signed		Year	Month	Day		
WARNING: Any person who makes a fasle statement is puni	shable by a fine or term of imp	risonmei		พายกเท	Биу		