



Discharge – UNAUTHORIZED USE OF COMPANY PROPERTY

Please answer all questions below. Any questions left unanswered WILL NOT be considered when determining the claimant's eligibility for Unemployment Insurance.

Claimant Name: _____ Last 4 Digits of Claimant's Social Security #: _____

Employer Representative Name: _____ Telephone: _____

Employer Representative Title: _____ Date completed Questionnaire: _____

Are you authorized to provide a statement on behalf of the company? YES NO

Employer Statement

1. What was the claimant's last physical date of work (mm/dd/yyyy)? _____

2. What date was the claimant fired/discharged (mm/dd/yyyy)? _____

3. Who discharged the claimant? Name: _____
 Title: _____

4. Why was the claimant discharged?

5. When did the claimant use the employer's property without authorization (mm/dd/yyyy)? _____

6. What property was used without authorization? _____

7. When did you become aware the claimant used the property without authorization (mm/dd/yyyy)? _____

If there is a gap in time between the date you became aware of the issue and the date of the discharge, please explain why you waited to discharge the claimant.

8. How did you become aware that the claimant used the property?

9. Were there any witnesses? YES NO

a. If yes, who witnessed the actions? Name: _____
 Title: _____

If witnessed, do you have a witness statement? YES NO

If no, can you obtain a witness statement? YES NO

NOTE: Obtain a witness statement and provide to the department, if available

Rhode Island Department of Labor and Training
Unemployment Insurance - Central Adjudication Unit

P.O. Box 20067, Cranston, RI 02920

Fax: 401-462-8318

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Employer Representative Name: _____ Telephone: _____

10. Did the claimant admit to using the property without authorization? YES NO

If yes, did the claimant give a reason for using the property? YES NO

If yes, what reason did the claimant give?

11. Is there a company policy regarding the use of property without authorization? YES NO

If yes, please provide specific details of the policy:

If yes, was the claimant aware of the policy? YES NO

If yes, how was the claimant made aware of the policy?

- Bulletin Board Email Handbook/Handout
 Verbally Video Not Informed

12. Has there been any prior incident(s) of the claimant company property without authorization? YES NO

If yes, provide specific details and dates:

If yes, was the claimant previously warned for the issue? YES NO

If yes, provide date of warning (mm/dd/yyyy): _____

- i) Type of Warning: Verbal Written Final
ii) Provide details of last warning:

iii) Name and title of person who issued the last warning:

Name: _____

Title: _____

13. Provide details of any other warnings issued to the claimant. Include the dates and the name of the individual(s) who issued the warning(s). If you did not have any prior warnings, indicate "None".

15. Enter any additional information you feel may be necessary:

I hereby certify that, to the best of my knowledge and belief, the information I have provided is true. YES NO

Signature: _____