

Carlson Building Maintenance

Termination Form

02-19-2026

Termination Form

Employee number: 15979

Employee last name: Scott

Employee second last name: _____

Employee first name: Landen

Last day worked: 02-16-2026

District Manager

Were warnings given? N/A

Eligible for rehire? Eligible for rehire: No

Explain missed shifts by employee: Reason employee quit: Employee has not returned to work since 02/16 and was a NCNS 02/19/2026

Marcio Rojas

02-19-2026