

Carlson Building Maintenance

Termination Form

04-09-2026

Termination Form

Employee number: 16790

Employee last name: Alvarado

Employee second last name: _____

Employee first name: Astrid

Last day worked: 04-04-2026

District Manager

Were warnings given? N/A

Eligible for rehire? Eligible for rehire: Yes

Explain missed shifts by employee: Reason employee quit: Quit

Cruz Hernandez

04-09-2026