

Termination of Employment Contract

Initiated by Employer

Dear _____ (Name of Domestic Helper),

I, _____ (Name of Employer) wish to terminate your employment contract as domestic helper under the Domestic Helper Contract No. _____ (Contract No.)

(Please tick as appropriate)

- by giving you _____ days / month(s)* notice.
- by giving you _____ days / month(s)* payment in lieu of notice.
- without notice.
- without payment in lieu of notice.

Your last working day will be ____/____/____.
DD MM YY

Reason(s) for termination (If any) :

Yours sincerely,

(Sign by Employer)

Full Name : _____

Date : _____

Acknowledged receipt by Domestic Helper :

(Sign by Domestic Helper)

Full Name : _____

Date : _____