



-  To be issued by the employer within five days from the date of the employee's request, in accordance with Article 43 of Decree-Law no. 220/2006 of 3 November.
-  False statements are punished according to the law.

1 Details of the employer

Name (natural or legal person)

Social Security Identification Number

Taxpayer Number

2 Personal details of the employee

Full name

Social Security Identification Number

Birth date

year month day

Date of employment contract termination

year month day

3 Reasons for the employment contract termination

Please tick **only** the corresponding reason

3.1. At the employer's initiative

- 1 - Just cause for dismissal due to circumstances attributable to the employee.
- 2 - Collective dismissal.
- 3 - Dismissal due to job termination.
- 4 - Termination of the employment contract during the probationary period.
- 5 - Dismissal on grounds of unfitness for work.
- 6 - Termination of service commission or equivalent situation, when there is no employment contract.

3

Reasons for the employment contract termination (continuation)

Please tick **only** the corresponding reason

3.2. At the employee's initiative

- 7 - Resolution with just cause.
- 8 - Resolution with just cause for late payments (outstanding wages).
- 9 - Termination of employment contract / resignation.
- 10 - Termination of the employment contract during the probationary period.

3.3. Termination of employment contract by mutual agreement

11 - Termination agreement due to the fact that the company is in a recovery process as provided for in the Insolvency and Corporate Recovery Code or in an out-of-court conciliation procedure.

Please state the case number and the company's name

12 - Termination agreement with reduction of staff because the company is in a difficult economic situation, as declared in accordance with the provisions of Decree-Law no. 353-H/1977 of 29 August.

Please state the applicable legislation

13 - Termination agreement with reduction of staff because the company, which belongs to a specific sector by means of a decree or official law, is undergoing restructuring.

Please state the applicable legislation

14 - Termination agreement with reduction of staff because the company is undergoing restructuring, declared by Order of the Government Member responsible for employment.

Please state the Order's number and date

15 - Termination agreement based on grounds allowing collective dismissal or termination of employment, taking into account the size of the company and the number of workers, in which the worker is informed, for the purposes of unemployment benefits' granting, that the termination of the employment contract complied with the quota limits laid down in Decree-Law no. 220/2206 of 3 November.

16 - Termination agreement without reduction of the employment level, with a view to strengthening the company's qualification and technical capacity.

17 - Termination agreement not provided for in paragraphs 11 to 16.

3.4. Expiry of the contract

18 - End of fixed-term contract.

19 - Termination of contract of a member of military staff who requested the respective renewal and it was not granted for reasons not attributable to him or because he reached the maximum contract period permitted by law.

20 - Dismissal initiated by the insolvency administrator before the definitive closure of the establishment.

21 - Death of the employer, dissolution or closure of the company (when there is no transfer of the establishment or company).

22 - Supervening, **absolute and definitive** impossibility of the employee to perform his/her work or of the employer to receive it.

23 - Old-age retirement of the employee.

24 - Invalidity retirement of the employee.

4

Employer certification

Date

____ - ____ - ____
year month day

Signature and stamp

5

Certification by the competent authority for labour inspection¹

Reason for contract termination

The employer did not comply with the formalities set out in the Labour Code

Another reason _____

Date

____ - ____ - ____
year month day

Signature and stamp

¹ To be completed in case the employer is unable or refuses to issue this statement

Data protection



The collected personal data will be processed by the competent Social Security services (Instituto da Segurança Social, I.P., Instituto da Segurança Social dos Açores, I.P.R.A and Instituto de Segurança Social da Madeira, IP-RAM) and will be kept for the period necessary to fulfil their intended purpose.

These Social Security services are committed to protecting your personal data and to fulfilling their obligations within the scope of data protection.

For further information on data protection, please consult the Social Security Online Service (*Segurança Social Direta*) at www.seg-social.pt.