

EMPLOYEE SEPARATION CHECKLIST

Employee Name
(Please Print) _____

Department _____

Date of Separation _____

This form must be completed and turned in to the Office of Human Resources before 5:00 p.m. of the day of your separation date.

Please have the appropriate personnel in the following offices initial your checklist.

_____ **Department Head/Supervisor**
Employee has completed and submitted final timesheet (if applicable) and has returned any University owned property or materials (such as textbooks, electronic equipment, uniforms, etc.)

_____ **Business Office (AD-2nd floor)** - Employee has no outstanding balance or has been informed of outstanding balance

_____ **Purchasing (AD-1st floor)** - Employee has returned Purchasing (P-card) if applicable.

_____ **Office of Safety and Security (Bus Tech Bldg-1st Floor)** - All keys and parking permits have been returned.

_____ **Help Desk (LRC First Floor)** – verification all checked out technology is returned.

_____ **HR (AD210)** Employee I.D. have been returned and update address

Current Address: _____

Employee Signature

Date