

## EMPLOYEE SEPARATION CHECKLIST

Employee Name:		Employee ID:		
Supervisor Name:		Unit/Program:		
RETURN to SUPERVISC	DR:			
	Initials/Date		Initials/Date	
College-Issued Lapto	p	<ul> <li>Employee Name Tag(s)</li> </ul>		
Employee ID Card		Other Tech Equipment		
RETURN to BUDGET (R	-			
College Credit Card	Initials/Date			
RETURN to SAFETY & S				
• Campus Key(s)	Initials/Date	<ul> <li>Parking Permit(s)</li> </ul>	Initials/Date	
RETURN to HR (Room 1	(013)			
	Initials/Date		Initials/Date	
ADA Equipment		Separation Checklist		
OTHER ITEMS:				
In the event the College r	needs to connect with	you after employment ends, p	lease provide:	
Personal Email Address: Home Mailing Address:		Home Phone Numbe	er:	
FINAL PAYCHECK:	Direct Deposit to Acct	On File Physical Check Mai	led to Home Address	
EXIT INTERVIEW:	With HRV	ia <u>Online Survey</u> With	Supervisor	
STAY CONNECTED:	Yes! I want to receive ir	nfo on College/Foundation even	ts and activities.	
EMPLOYEE ACKNOWLED	GEMENT:			
l understand that I may be	billed for any College p	property issued that I fail to retu	rn before separation.	
Employee Signature:		Date:		
NOTE: Please return comp	leted form to HR (Roon	n 1013) prior to departure. Than	k you!	
HR ONLY: Payro	oll Exit Intervie	w Emp Alumni	Last Updated: 11/22/24	