EMPLOYEE SEPARATION CHECKLIST

Employee Name  
(Please Print)  
_____________________________________

Address  
_____________________________________
_____________________________________

(Complete if you are moving or if your address in Human Resources is 
not current. This will help us get your W-2 to the correct address at the end of the year)

Department  
_____________________________________

Date of Separation  
_________________________

************************************************************************************
This form must be completed and turned in to the Office of Safety and Security 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 signed final timesheet (if applicable) and has returned any University owned property or materials (such as 
textbooks, electronic equipment, uniforms, etc)

Business Office (Admin Bldg-2nd floor)  

__________  
Employee has no outstanding balance in bursar account

__________  
Employee has been informed of outstanding balance in bursar account

__________  
Purchasing (Admin Bldg-2nd floor)  
Employee has returned Purchasing (P-card)

__________  
Office of Safety and Security (Bus Tech Bldg-1st Floor)  
• All keys have been returned  
• Parking Permit and Emp I.D. have been returned

_______________________________  _____________  
Employee Signature    Date

_______________________________  _____________  
Receiving Security Officer    Date