

EMPLOYEE INFORMATION

Employee Name: _____

Employee ID: _____

Position: _____

Hire Date: _____

Reason for Separation: _____

Last Day Worked: ____ / ____ / ____

THE FOLLOWING ITEMS HAVE BEEN DISCUSSED WITH THE EMPLOYEE:

- | | | | |
|-----------------------------|------------------------------|-----------------------------|------------------------------|
| Severance pay | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Unused vacation payout | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Expense reports outstanding | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Advances outstanding | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Mail/pick up last check | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

Employee opted to receive final paycheck via: Mail Pick up final paycheck Direct deposit

Employee mailing address (if mailing final paycheck):

THE EMPLOYEE RETURNED THE FOLLOWING ITEMS (UNLESS N/A IS CHECKED):

- | | | | |
|-----------------------------------|------------------------------|-----------------------------|------------------------------|
| ID card/badge | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Door key(s) or electronic card(s) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Locker key | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Credit card(s) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Cell Phone | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Tools | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Computer/laptop | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Uniform(s) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Company records and manuals | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Other _____ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Other _____ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| Other _____ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

ACKNOWLEDGMENT:

Departing employee's signature: _____

Date: _____

Supervisor's signature: _____

Date: _____