



CHECKOUT PROCEDURE FOR FULL-TIME & REGULAR PART-TIME TERMINATING EMPLOYEES

The following procedures shall be completed in connection with termination of employment at this institution.

- I. Each terminating employee should submit a resignation in the form of a letter or memorandum to the President with copies to his/her supervisor, the Vice President for Business Affairs and the Assistant Vice President for Human Resources.
- II. The President will send a letter of confirmation to the employee who is terminating employment.
- III. All terminating personnel are to visit the offices listed below and receive clearance via full signatures.

	<u>Signature Required for Clearance</u>
A. Library: <input type="checkbox"/> Books <input type="checkbox"/> Equipment	_____
B. Campus Police: <input type="checkbox"/> Keys <input type="checkbox"/> Parking Permit _____	_____
C. Department/Division: _____ <input type="checkbox"/> Keys <input type="checkbox"/> Books <input type="checkbox"/> Computer Software <input type="checkbox"/> Grant-funded Equipment	_____
D. IET: <input type="checkbox"/> Tapes/CDs/DVDs <input type="checkbox"/> Equipment <input type="checkbox"/> Laptop Computer <input type="checkbox"/> iPad ...	_____
E. Business Office: College Credit Card _____ ProCard _____	_____
F. Human Resources:	
1. Retirement: ___ TCRS ___ ORP: _____	_____
2. Health Insurance Plan: _____ Term Date: _____	_____
3. Dental Insurance Plan: _____ Term Date: _____	_____
4. Vision Plan: _____ Term Date: _____	_____
5. Conversion: ___ Basic Term; ___ Vol AD&D; ___ LTC; ___ Vol Term	_____
6. Miscellaneous Benefits: _____ COBRA, _____ LTD	_____
7. Flexible Spending Account/Obligation _____	_____
8. State ID _____ Name Badge _____	_____
9. Leave/Time submitted via STARnet	_____
10. Unused Sick Leave Hours: _____ Verified for TCRS _____	_____
11. Unused Annual Leave Hours: _____ Terminal Leave: ___ Yes ___ No	_____
12. Last Work Day: _____ Last Paid Day: _____	_____
Termination Date: _____ Retirement Date: _____	_____

IV. Submit this form to Human Resources. If an exit interview is requested, then an exit interview form will be completed by Human Resources and filed along with this *Checkout Procedure* form in the terminating employee's personnel file.

TO BE COMPLETED BY TERMINATING EMPLOYEE:

NAME: _____ SSN/BANNER ID: _____

TITLE: _____ DEPARTMENT: _____

ADDRESS: _____ PHONE: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP: _____

EXIT INTERVIEW: Requested Declined ----- No Response From Employee

Realizing that, subsequent to the last working day, employees are not authorized to have in their possession any official records, data and or property belonging to the institution, I certify that all papers and records, including electronic files, as well as pertinent information and data supporting the ongoing function of the unit remain in satisfactory condition and thus are present, available and usable by staff to sustain the ongoing operation of this unit. Furthermore, I certify that all usernames, passwords, and email addresses used in the performance of my job duties have been made known to the institution.

Final pay will be made by direct deposit into the account that is currently on file in the Payroll Department.

NOTE: A WSCC retiree parking permit, valid for one year, is available free of charge from Campus Police. Also, please be aware that, consistent with WSCC Policy 06:40:00, you will no longer have access to your Walters State email account.

SIGNATURE: _____ DATE: _____