



SEPARATION OF EMPLOYMENT CHECKLIST

(For Division/Department Use)

Please use this checklist to ensure compliance for employee listed below:

Employee Name: ID#:

Intended Last Date of Work:

Type of separation:

- Resignation Retirement Termination
Medical/39 Month Adjunct Assignment ended Other:

Collect YCCD Property:

Table with 2 columns of items (Keys, Uniform, Badge/ID, Parking Permit, etc.) and 3 columns of checkboxes (Yes, No, N/A).

Employee has:

Table with 2 columns of tasks (Provided Letter of Resignation, Sent copy of letter to HR, etc.) and 3 columns of checkboxes (Yes, No, N/A).

IT has been notified to:

Table with 2 columns of IT tasks (End Network Access, End Voice Mail, End E-Mail) and 3 columns of checkboxes (Yes, No, N/A).

Please explain any 'No' checkmarks or other pertinent details:

Three horizontal lines for providing details.

Manager/Division Dean: Date: