

EMPLOYEE SEPARATION FORM

Last Name	First Name	MI
Street Address	City	State Zip
Date of Hire	Date of Separation	
Job Title	Department	

REASONS FOR SEPARATION:

- Resignation Retirement
 Termination Other _____

Comments:

HUMAN RESOURCES AND PAYROLL:

Distribution of Final Paycheck: Direct Deposit Mail Payroll

EMPLOYEE SEPARATION

This form must be completed and returned to Human Resources prior to the release of your final check. All college property must be returned to the respective departments and verified by the Supervisor.

Employee Name: _____ Department: _____

CONTACT	ITEM	SIGNATURE	DATE
Human Resources	Begin Separation Processing		
Employee Supervisor	Resignation Letter Departmental Keys (if any) Computer Software and/or Equipment		
Library Circulation Desk	Books		
Information Technology	Deletion of Email Acct. Home/Office Computer Hardware/Software		
Security	ID Card Permit Transponder Panther Alert Deactivation		
Facilities	College Keys		
Human Resources	Completed Separation Form Received		
Academic Affairs *Faculty Only	Student Grades and Attendance Records		
If you are changing your permanent address after separation from the college, it is imperative that you provide payroll with this new address so that tax records can be sent to you in a timely manner. Failure to do so may result in tax filing penalties.			Employee Signature

PAY RELEASED:

BY: _____

DATE: _____