CLASSIFIED EMPLOYEE EXIT/TERMINATION FORM

are requested to have this form complet	part-time) who are terminating employment with the University ed and returned to the Office of Human Resources prior to the
	to be drawn. <u>A final payroll check cannot be issued until this</u> <u>s Office.</u> Thank you for your cooperation.
Name	Termination Date
Title	Department/Division
Forwarding Address:	
1. The above named has returned all	library documents.
(Director of Library)	Date
	University any money and has turned in the State shire's Grocery Card (if applicable).
(Comptroller - Cashier)	Date
3. The above named has returned all	University property, including uniforms.
(Dean or Department Head)	Date
4. The above named has terminated us	er ID/Password Access with the Computing Center.
(Director of Computing Center)	Date
5. The above named does not owethe	University for any outstanding parking tickets.
(University Traffic Office)	Date
6. The above named has turned in all	University keys.
(Physical Plant)	Date
7. The above named has turned in the	University Purchasing Card.
(Director of Purchasing)	Date
8. The above named has turned in the	e Faculty and Staff ID card.
(Human Resources Office)	Date