Bishop State

Revised September 2022

BISHOP STATE COMMUNITY COLLEGE
EXIT CHECKLIST/CLEARANCE FOR FINAL PAYCHECK

This form must be completed and returned to the Human Resources Office

Employee Name: _____

Job Title: _____

Employment Date: _____ Last Day Worked: _____

Type of Termination: Retirement ____ Resignation ____ Dismissal ____

Directions: *Please circulate this form to the appropriate staff in each department listed. Enter n/a in each section if not applicable. Signatures are required for each section. This form must be completed and returned to the Human Resources office for the clearance of the final paycheck.*

Supervisor

	Initials	**Received/Cleared** *(check if applicable)*
Instructional Materials		
Other:		

_____ _____ _____

Supervisor Signature Print Name (Supervisor) Date

Information Technology

Equipment Type	**Serial #**	**Property #**	**Initials**

_____ _____ _____

IT Signature Print Name (IT) Date

Human Resources

	Initials	**Received/Cleared** *(check if applicable)*
Keys		
Employee I.D. card		
Parking Hangtag		

_____ _____ _____

HR Signature Print Name (HR) Date

I affirm all College property for which I am responsible has been returned

_____ _____ _____

Employee Signature Print Name Date