

**EMPLOYEE INFORMATION:**

Employee Name: \_\_\_\_\_

Employee ID: \_\_\_\_\_

Position: \_\_\_\_\_

Hire Date: \_\_\_\_\_

Reason for Separation: \_\_\_\_\_

Last Day Worked: \_\_\_\_\_

**THE FOLLOWING ITEMS HAVE BEEN DISCUSSED WITH THE EMPLOYEE: (if applicable)**

- Severance pay ☐ Yes ☐ No ☐ N/A
- Unused PTO payout ☐ Yes ☐ No ☐ N/A
- Bonus payout structure ☐ Yes ☐ No ☐ N/A
- Commission payout structure ☐ Yes ☐ No ☐ N/A
- Expense reports outstanding ☐ Yes ☐ No ☐ N/A
- Advances outstanding ☐ Yes ☐ No ☐ N/A
- Final paycheck delivered via: ☐ Mail ☐ Direct Deposit ☐ Employee will pick up final paycheck
- Employee mailing address (if mailing final paycheck):  
\_\_\_\_\_

Street	City	State	Zip
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**THE EMPLOYEE RETURNED THE FOLLOWING ITEMS (UNLESS N/A IS CHECKED):**

- |                                     |                              |                             |                              |
|-------------------------------------|------------------------------|-----------------------------|------------------------------|
| • ID card/badge                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Door key(s) or electronic card(s) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Locker key                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Credit card(s)                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Cell Phone                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Tools                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Computer/laptop                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Uniform(s)                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • Company records                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • _____                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • _____                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • _____                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • _____                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| • _____                             | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

**ACKNOWLEDGMENT:**

Departing Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_