

## CLEARANCE CHECKLIST

**EMPLOYEE** 

Name of Employee		Date		
Department				
The employee must present this form to the following departments for signatures of the department head or other authorized representative. Signatures verify that all property which the employee is responsible for has been turned in, properly accounted for, or that restitution has been made.				
Department	Item/Property	Signature/Department Head		Date
Department Assigned	Any items assigned to employee			
Transportation Department	Parking Decal			
Library/Resource Center	Books, Audio Visual Equipment, etc.			
Human Resources	ID Card, Handbook			
Ticase indicate any item w	nich restitution was made and circumstances			
To Be Completed By the Payroll Officer Final payroll check should not be issued unless the employee has successfully cleared each department above.				
I certify that the above-named employee has been processed out and has received his/her final payroll check.				
Signature-Payroll Officer		Date		
I certify that I have received my final payroll check and have returned all property assigned to me.				
Signature-Employee		Date		

## Distribution:

Employee Payroll Human Resources