Employee Termination Checklist

Employee Name: _____
Supervisor._____ Dept: _____ Account #: _____
Forwarding Address (if changed): _____
_____

Phone number: Day: ( ) __ __ __ - __ __ __ __ Eve: ( ) __ __ __ - __ __ __ __

Last day worked: _____

Instructions: *Please put your initials and the date next to the action that has been taken.*

☐ **Voluntary Termination**
_____ Obtain resignation in writing from Employee

☐ **Other** (*Death, Military, etc.*)
_____ Received supporting documentation
List:_____

☐ **Involuntary Termination** *(Steps to follow)*
_____ a) Corrective action followed
_____ b) Employee explanation provided
_____ c) Human Resources reviewed information
_____ d) Letter of termination including reasons

Review With Employee

_____Effective Date of Termination

_____ Final wages
- ❑ Check to be picked up Where?_____
- ❑ Check to be mailed Where?_____

_____ Benefit pay
- ❑ Accrued time off
- ❑ When received

_____ Benefits information summary

_____ Rehire eligibility: Same dept. Y N Other dept. Y N

_____ How references will be handled

_____ Subsequent access to premises

Collect

_____ Uniform
_____ All keys (locker, bldg.,desk, cabinets,etc)
_____ Two-way radio
_____ Cellular phones
_____ Pagers
_____ Credit cards
_____ Time card
_____ Safeword card
_____ ID cards
_____ Laptop computers
_____ Reference/Training/Project Manuals
_____ Other proprietary information
_____ Photocopy cards
_____ Parking tag (return to Parking Services)
_____ Any other Univ. property: _____

Give to Employee (Optional)

_____ Exit Interview
_____ Benefits booklet
_____ Contact information for HR
_____ Contact information for Dept.

Cancel

_____ Computer access
_____ Long distance authorization
_____ Credit cards
_____ Security codes
_____ Direct Deposit
_____ Cancel email (exchange-admin@iupui.edu)

Other

_____ Clean work area, remove personal belongings
_____ Process Termination eDoc
_____ Remove from phone list – dept. and IUPUI

Notes:

_____
_____
_____
_____

Signature of Supervisor and Date: _____