

EXIT CHECKLIST FOR STAFF LEAVING THE UNIVERSITY

Instructions:

Staff member: Please return your equipment to the departments indicated below and obtain their signatures for verification. The completed form must be submitted to the Human Resources department on your final day of work.

Member Name: _____

ITS – Information Technology Services (Admin Bldg)

List your system access to be removed from system records:

Log-on ID _____

- Equipment returned
- Electronic mail messages deleted except where content is crucial to University work, in which case they should be directed to Program Chair/Supervisor
- Cell phone. Number _____
- Blackberry. Number _____
- University assets /software returned
 - Computer
 - Printer
 - Monitor
- Other – please list _____

Signature – Information Technology Services **Date**

Facilities

- Room keys and access devices signed off and returned to Facilities

Signature – Facilities **Date**

Parking Services (7-208 Agora)

- Parking pass cancelled
- Parking fines paid in full

Signature – Parking Services **Date**

Purchasing

- Other equipment returned to inventory
- Mastercard statement and/or all outstanding receipts submitted
- Mastercard returned

Signature – Purchasing **Date**

Finance

- Monies owed paid in full (e.g. PD, travel advance)
- Credit card returned
- UNBC ID card returned
- Overtime bank, time in lieu if applicable

Signature – Finance **Date**

Library

- Books on loan returned
- Charges paid in full

Signature – Library **Date**

EMS – Educational Media Services

- Equipment returned
- Charges paid in full

Signature – EMS **Date**

Employee

- Remove personal files stored on PC
- Remove personal items from your office
- Copy card(s) to Program Chair/Supervisor
- Keys to filing cabinets, desks, cupboards, etc returned to Program Chair/Supervisor
- Change Voicemail message on your phone

I will cease employment with the University of Northern British Columbia on _____ and I declare that I have completed the activities outline in the Exit Checklist.

Signature – Employee **Date**

Signature – Program Chair/Supervisor **Date**

Human Resources - Administration

- Tuition Waiver cancelled
- Benefits/Pension: If applicable, Sun Life will mail a package regarding benefits/pension conversion options.
- Vacation audit to payroll
- Departure notice sent
- Relocation expenses owing to be paid in full
- Provide forwarding address to Human Resources, if applicable
- Other information

Signature – Human Resources **Date**

Return this form to the Human Resources Department for inclusion in personal file.