



EMPLOYMENT CLEARANCE CERTIFICATION

(Form must be completed before last day of employment)

Name: _____

Department: _____ Position Number: _____

Employee ID Number: _____ *Please include copy of resignation/retirement letter*

Position Type: Circle one Civil Service Faculty A&P

My employment with the University will terminate at the close of business on the following date:

Final check will be a "live" check, unless otherwise approved by the Director of Human Resources.

Distribution of final vacation or other leave check(s) can take 2-4 weeks after final separation.

Please verify your address information below.

Street: _____

City: _____

State and postal code: _____

Must obtain signatures to certify that all items are settled and to receive final payout, if applicable.

ITEM	Authorized signature	Date
Departmental property (incl off-campus) <i>Other (e.g. corporate credit card)</i>	_____	_____
Computer Access <i>(NEIUworks, Banner, Academic Systems and phone charges)</i> <i>(NEIUportal and e-mail access will remain active as per NEIUworks policy)</i>	University Technology Services - (LWH - 4067)	_____
University Keys <i>(card access: office or building must be deleted)</i>	Key Control - (PF - 109)	_____
Parking Decal /Parking Debts <i>(so there will be no deduction on final check)</i>	Parking Office - (PF 126)	_____
Library Services	Library Administrative Offices - (LIB 119)	_____
NEIU Student Monetary Obligations	Bursar's office - (D-107)	_____

Deliver completed form, final timesheet & Employee ID to Office of Human Resources _____ **All three (3) things must be collected before signature**
Office of Human Resources - (BOB)

I understand that obligations not resolved will be referred to the Controller's office for collection.

If a retiree, would you like to keep your NEIU email address for life (please circle) YES or NO

Employee Signature (or representative - if applicable) _____ Date _____