

**The University of Texas Health Science Center at San Antonio**

**EXIT/CLEARANCE FORM**

This form should be completed between the hours of 8:30 a.m. and 4:30 p.m., Monday through Friday on your last working day

**SECTION I:** (See reverse side for instructions)

Name: \_\_\_\_\_ Dept: \_\_\_\_\_ Last Day on Payroll: \_\_\_\_\_ Last Day Worked: \_\_\_\_\_  
 Title: \_\_\_\_\_ Employee IDN: \_\_\_\_\_ Contact Phone #: (    ) \_\_\_\_\_  
 Forwarding Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Purpose of Clearing:   ☐ Transfer   ☐ Termination   ☐ Retirement   ☐ Leave of Absence (specify): \_\_\_\_\_  
 (Examples: Military, FMLA: Parental; Worker's Comp.)

**SECTION II:**

<b>Clearance Areas</b>	<b>University Property</b>	<b>Clearing Department Signature</b>	<b>Date</b>	<b>Employing Dept. N/A Initial</b>
1. <b>Employing Department</b> .....		_____	_____	XXXXXXXX
All University property, including software and textbooks, has been accounted for in the employing department.				
2. <b>BCHD Protective Services/</b> .....	Keys/Parking Passes	_____	_____	_____
<b>Employee Registration</b> (Rm 014, Sub-Level, MCH)				
3. <b>University Police</b> .....	Keys/Access Cards	_____	_____	XXXXXXXX
(Parking Service Office)                      Permits/Traffic Records				
4. <b>General Services (Linen)</b> .....	Lab Coats/Uniforms	_____	_____	_____
(Rm 1.346, DTL School)				
5. <b>Lab Animal Resources</b> .....	Animals/Protocols	_____	_____	_____
(Rm 113D, MED School)				
6. <b>Environmental Health &amp; Safety</b> ....	Radioactive materials/	_____	_____	XXXXXXXX
(Rm 1.343T, DTL School)                      Radiation producing devices				
7. <b>Cashier Window (Bursar)</b> .....	Outstanding Obligations	_____	_____	XXXXXXXX
(3rd Floor, MED School)                      (Corporate Card)				
8. <b>Grants Management</b> .....	Research/Grant Accounts	_____	_____	_____
(Rm 400L, MED School)				
9. <b>Institutional Review Board</b> .....	Research Involving	_____	_____	_____
(Rm 225L, MED School)                      Human Subjects				
For individuals conducting research call IRB (ext 2351) to confirm that no protocols are active.				
10. <b>Computing Resources</b> .....	VAX Accts/Equipment	_____	_____	_____
(Rm 411L, MED School)				
11. <b>Communications Technology</b> .....	Authorization Code/	_____	_____	_____
Directory/Cellular				
Telephone/Long Dist. Card				
12. <b>Library</b> .....	Books Journals/Bills	_____	_____	_____
13. <b>Employing Department</b>				
Clearing individual returns pink copy to employing department.				

Department Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Transferring** employees do not need to proceed to Human Resources. Return this form to your original department representative.

**SECTION III:**

Human Resources/Benefits  
(ADM Bldg.)

**Note:** All checks received in HR will be mailed to the forwarding address.

☐ Monthly                      ☐ Semi-Monthly                      ☐ Lump Sum                      Comments: \_\_\_\_\_  
☐ Direct Deposit                      ☐ Sick Leave Pool                      ☐ Retirement \_\_\_\_\_  
☐ Insurance (COBRA)                      ☐ Exit Questionnaire                      \_\_\_\_\_

Transfer to another state agency?   ☐ Yes   ☐ No   Agency Name: \_\_\_\_\_ Date: \_\_\_\_\_

Is position benefits eligible?   ☐ Yes   ☐ No

I certify that all appropriate areas have been properly cleared. I understand that The University of Texas Health Science Center at San Antonio reserves the right to request the restitution of or payment for any property or the settlement of any outstanding obligations that might have been excluded from this clearance process.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

## INSTRUCTIONS FOR EXIT/CLEARANCE PROCEDURE

**Purpose:** All keys, identification cards, uniforms and other Health Science Center property and materials must be returned on or before the final day of employment. Equipment must be returned no later than the day before you clear. Failure to properly obtain clearance will necessitate the **withholding of the final paycheck**.

### **Employing department:**

1. The employing department must initiate the "Exit/Clearance Form: upon termination, retirement, leave of absence, or transfer of an employee. (Section I).
2. The employing department completes the employee identification section of the top of the form. (Section I).
3. The employing department shall take full responsibility for all clearance areas that **do not apply** to a departing employee. The supervisor may enter "N/A" (Not applicable and sign his/her initial on the right-hand column. (Section II).
4. The employing department retains pink copy. (Section II).

### **Departing employee:**

1. The departing employee is required to obtain authorized signatures in all clearance areas on the last day worked. This form should be completed between the hours of 8:30 a.m. and 4:30 p.m., Monday through Friday. The employee is to hand-carry this form in the order of the departments listed. Student employees must also clear through their respective dean's office. (Section II).
2. Any employee involved in research should clear through Laboratory Animal Resources, Grants Management and Institutional Review Board. (Section II).
3. The **transferring** employee need not proceed to Human Resources. Return all copies of form to original department representative.
4. The departing employee returns pink copy to employing department and proceeds with original and yellow copy to Human Resources. (Section II).
5. The departing employee will sign his/her name and date at the bottom of the form. The Human Resources Representative will be a witness. (Section III).

The Office of Human Resources retains original and yellow copy.