



**TERMINATION OF EMPLOYMENT**

**★REQUIRED**

★Name: \_\_\_\_\_ ★Location/Department: \_\_\_\_\_

★Position: \_\_\_\_\_ ★Effective Date of Termination/Resignation: \_\_\_\_\_

Date Letter of Resignation Received: \_\_\_\_\_ ★Last Day Worked: \_\_\_\_\_

Reason for Termination/Resignation: \_\_\_\_\_

★Prepared by: \_\_\_\_\_ ★Date Completed: \_\_\_\_\_

**Forward the letter of resignation and this form completed to GECS Human Resources.**

**For Human Resources**

- Personnel File updated
- Did Employee have Insurance?
  - If Yes, Send Health Ins. Termination paperwork to Health Provider
  - If Yes, Prepare COBRA letter & mail to Employee
- NOTES updated (Last Day)
- Exit Letter sent (If Applicable)
- Send Exit Checklist to
- Employee's place of work
- Forward to GECS Payroll

**Reviewers' Initials**

\_\_\_\_\_

Yes     No

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Payroll Department**

- Basic Info edited
  - Active = No
  - Status = Inactive
- Employee Pay Rates Inactivated
- Master Payroll Screen Inactivated
- Attendance verified
  - Verified last day worked
- Removed from Invoicing List
- Term the Catalog #

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Human Resources
DISTRICT PROPERTY IN-USE
(Exit Check-list)

The purpose of this form is to make GECS aware of what property the district may have supplied to the employee. In which case the employee terminates, GECS can verify the property has been turned in.

Employee Name: \_\_\_\_\_ Employee Number \_\_\_\_\_

Job Title \_\_\_\_\_ Worksite Location \_\_\_\_\_

District Property List

Other Considerations

- Yes No
District Charge Card
Tools/Equipment
Uniforms/Smocks
District and/or Student Records
ID Badge/Building Entry Badge
Keys/Key Fob
Other, please specify:

- Yes No
Voice message changed/calls forwarded
Change of address
Pending projects reviewed with supervisor
Opportunity to meet with HR
Resignation Letter
Termination form and documentation to GECS HR

I have reviewed the property list and other considerations with my supervisor and acknowledge that all worksite property that is in my possession has been returned to my worksite location upon resignation/termination.

Employee Signature

Employee Supervisor

Date

Date



**Human Resources  
Employee Exit Checklist**

Name: \_\_\_\_\_ Employee Number \_\_\_\_\_

Job Title \_\_\_\_\_ Worksite Location \_\_\_\_\_

Resigned \_\_\_\_\_ Terminated \_\_\_\_\_ Last Day of Work \_\_\_\_\_

Employee Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

.....*For Technology and Media Services Use Only*.....

**Deactivation of Accounts**

Yes	No	NA	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Head-end Access Code
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	E-mail (Outlook)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Network Login
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Listservs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Synervoice
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Voicemail
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equitrac
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Self-service Help Desk
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blackboard
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CEO Executive
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HRS/FAS/SPM
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employee Web
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AppliTrack
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meeting Room Manager
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone Calling Card
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cellular Phone
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pager
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PDA/Hand Held Device
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Computer/Laptop
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Portable Carrying Case
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Software
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Flash Drive
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Digital Camera

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Technology/Media Services Signature \_\_\_\_\_  
 Date