

# MCCS EMPLOYEE CHECKOUT SHEET

1. Your final check will be mailed to your forwarding address the pay period following the final date of employment. If you would like to pick up your final check, please inform HR and you may pick it up in the HR Office.

2. EMPLOYEE NAME \_\_\_\_\_ EMPLID \_\_\_\_\_

3. BRANCH \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

FORWARDING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Smocks or Uniforms Returned (if applicable)

\_\_\_\_\_ Keys Returned

\_\_\_\_\_ Other Equipment (phones, laptops, walkie/talkies)

\_\_\_\_\_ Name Tag

\_\_\_\_\_ To ensure PCI Compliance: **send email to Help Desk – MCCS HHA,  
to remove employees from all computer & EPOS systems**

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

## 4. FOR USE BY HR OFFICE

\_\_\_\_\_ CAC Card\*

\_\_\_\_\_ Parking Pass

\_\_\_\_\_ Health Card

\_\_\_\_\_ Dependent ID Card(s)

\_\_\_\_\_ Travel Card Returned/Deactivated

\_\_\_\_\_ Purchase Card Returned

\_\_\_\_\_ Insurance Terminated

\_\_\_\_\_ Retirement Terminated

\_\_\_\_\_ Exit Interview

\* If no CAC card returned, employee must sign the lost or stolen CAC card form.

\_\_\_\_\_  
HR Signature

\_\_\_\_\_  
Date

## 5. FOR USE BY ACCOUNTING OFFICE

\_\_\_\_\_ MCCS Debt Clear

\_\_\_\_\_  
Date

\_\_\_\_\_  
Accounting Signature

\_\_\_\_\_  
Date

Upon completion, this form will be forwarded to the HR Office to be filed in the Official Personnel Folder of the employee.