

Lands Supervisor Checklist for Employee Leaving State Service

Keep this copy at work site. If employee is Site Superintendent send a copy to Director of Land Mgmt in Springfield

Employee Name: _____ Signature: _____ Title: _____

Work Site Location: _____ Last Date of Work: _____

Reason for Leaving

_____ Retirement _____ To Take Another State Position _____ Personal _____ Death _____ Other

Check off each of the following items/turn ins that is applicable

	<u>Comments</u>
_____ Keys (shop, gates, vehicles, safe, lock boxes, buildings)	_____
_____ ID Badge	_____
_____ Cell Phone/Blackberry	_____
_____ Laptop	_____
_____ Uniforms	_____
_____ State Issued Vehicle	_____
_____ Credit Cards - Vehicle	_____
_____ Commuting Report - Turned in to Fiscal	_____
_____ Annual Inventory Certification: list most recently completed date -->	_____
_____ Property Control Change Location Supervisor Form Completed	_____
_____ Petty Cash & Change Funds Custodian Name Changed	_____
_____ Locally Held Bank Accounts Name Changed	_____
_____ Notification of Employee Termination (sent to Human Resources)	_____
_____ Contact Springfield regarding intent to vacate Site Residence	_____

Explanations:
