

SEPARATING EMPLOYEE CLEARANCE FORM

(Includes employees on leave of absence without pay for 6 months or 1 semester)

NOTE: THIS FORM IS NOT FOR FERP OR REAPPOINTED FACULTY/STAFF

Employee's Name _____ Department _____

Social Security # _____ Position # _____

Separation/Leave of Absence Date _____

**FINAL PAY WARRANTS CANNOT BE RELEASED UNTIL CLEARANCES BELOW HAVE BEEN OBTAINED
(COMPLETE SECTIONS 1, 2 & 4 OR 3 & 4)**

1. EMPLOYEE, DEPARTMENT SECRETARY OR CHAIRPERSON

(PLEASE CALL FOR CLEARANCES AND INFORMATION)



Your Department:

Return: Equipment

Complete: Final Absence Report

Person Contacted Date

Telecommunications: x5000 (8 a.m. to 5 p.m.)

I do do not have a campus calling card

Person Contacted Date

Computing: x3815 (8 a.m. to 5 p.m.)

Close Keep my E-mail account open for 6 months

***Close Banner and CMS account access**

Person Contacted Date

Human Resources: x3626 (8 a.m. to 5 p.m.)

Discuss: Retirement Contribution

Return: Training Materials, Cellular Phone or Pager

Person Contacted Date

SECTION 1 COMPLETED BY

Person Completing Form Date

2. EMPLOYEE

THESE ITEMS MUST BE WALKED THROUGH (please call ahead). THIS FORM MUST BE COMPLETED WITH REQUIRED SIGNATURES before it is turned in at the last stop, Financial Services.

Plant Operations: x3646 (8 a.m. to 5 p.m.) Call 24 hours in advance. Return: All University Keys

Authorized Signature Date

Library: x3431, Room 110 (8 a.m. to 5 p.m., M – F)
Return: Library I.D. Card

Authorized Signature Date

Media Services: x3168, Gist Hall, Room 221

Authorized Signature Date

3. DEPARTMENT CHAIR OR DIRECTOR

No debt incurred/property issued (i.e., keys, library card, equipment).

Signature of Dept. Chair/Director Date

4. EMPLOYEE

Financial Services: x3521, SBS 345 (8 a.m. to noon, 1 p.m. to 5 p.m.)

Return: Parking Decal, American Express Corporate Card, General Services Credit Card

Clear: Outstanding Obligations, Accounts Receivable, Travel Advance/Claims, Salary Advance, Moving Expense Reimbursement.

Authorized Signature Date

Please turn this form into Financial Services, SBS 345.

Employee: For disposition of your Final Pay Warrant, you must complete the Payroll Departure Information form on the back.

Revised: 08/06

PAYROLL DEPARTURE INFORMATION

Please print clearly:

Full Name

Social Security Number

A. DESTINATION – Please mark one to indicate your intended destination upon leaving H.S.U.

- | | |
|-------------------------------------------------------------|---------------------------------------------------------------|
| 1. <input type="checkbox"/> Another CSU Campus* | 8. <input type="checkbox"/> Graduate Study* |
| 2. <input type="checkbox"/> University of California* | 9. <input type="checkbox"/> Elementary or secondary education |
| 3. <input type="checkbox"/> California private institution* | 10. <input type="checkbox"/> Industry or private practice |
| 4. <input type="checkbox"/> California junior college* | 11. <input type="checkbox"/> Research or service agency |
| 5. <input type="checkbox"/> Other U.S. public institution* | 12. <input type="checkbox"/> Government |
| 6. <input type="checkbox"/> Other U.S. private institution* | 13. <input type="checkbox"/> Other |
| 7. <input type="checkbox"/> Foreign institution* | 14. <input type="checkbox"/> Unknown |

*

Name of Institution

Campus Location – City and State

B. DISPOSITION OF FINAL PAY WARRANT -

Pay Period

Currently enrolled in Automatic Bank Deposit Program – deposit my final warrant in the bank as usual.

To Cashier's Office (open hours 10:00 a.m. to 4:00 p.m.)

Mail to address indicated below:

if applicable

Street Address

City

State

Zip

Signature

Date

TO BE COMPLETED BY PAYROLL OFFICE

| | | | | | | | | |
|---------------------------------|-----------------------------|------------------------------|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Enrolled in Health Insurance | <input type="checkbox"/> No | <input type="checkbox"/> Yes | HLth | <input type="checkbox"/> | Dntl | <input type="checkbox"/> | Vis | <input type="checkbox"/> |
| Outstanding Salary Advances | <input type="checkbox"/> No | <input type="checkbox"/> Yes | | | | | | |
| Outstanding Accounts Receivable | <input type="checkbox"/> No | <input type="checkbox"/> Yes | | | | | | |
| Outstanding Parking Deduction | <input type="checkbox"/> No | <input type="checkbox"/> Yes | | | | | | |
| Automatic Bank Deposit | <input type="checkbox"/> No | <input type="checkbox"/> Yes | Cards Pulled? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| Keys (all keys issued returned) | <input type="checkbox"/> No | <input type="checkbox"/> Yes | | | | | | |

Disposition of final warrant(s) completed by

FINISHED!