

Separation Clearance Form

Instructions: Separating employees <u>must return university property</u> to the appropriate location, pay outstanding fees (including parking citations) and financial obligations and, have each section below signed as noted.

parking citations) and financial obligations ar	nd, have ea	ch section	below signed as noted.		
Employee Name:		UID:	UID:		
Department:		Job Title:	Job Title:		
Supervisor's Name:			Business Manager's Name:	Business Manager's Name:	
Last Day Worked:		Separation Date:	Separation Date:		
Forwarding Address:		Phone Number:			
EMPLOYEE					
Cut up your Wright 1 Card and discard it					
DEPARTMENT					
	Submitte	ed to HR	AUTHORIZED SIGNATUR	E DATE	
Resignation Letter	Yes	No			
Personnel Action Form (PAF)	Yes	No			
Exit Questionnaire https://www.wright.edu/human- resources/benefits/leaving-the-university	Yes	No			
DEPARTMENT PROPERTY					
	APPLI	CABLE	AUTHORIZED SIGNATUR	E DATE	
Computer Equip (lap top, thumb drive)	Yes	No			
Tools/Equipment	Yes	No			
University Credit Card	Yes	No			
Uniforms	Yes	No			
Other	Yes	No			
Facilities Management Custom	er Care	Center	(065 Allyn Hall) - <mark>Employees i</mark>	<mark>must visit</mark> the	
Facilities Management Customer Care Center to submit keys, parking permit; otherwise, charges will apply.					
	APPLI	CABLE	AUTHORIZED SIGNATUR	E DATE	
University Building/Door Keys	Yes	No			
Parking Pass	Yes	No			
Outstanding Parking Citation	Yes	No			
CERTIFICATION AND SIGNATURES					
I certify the information I have furnished or understand the information I supplied may borrowed from the Dunbar Library followin I understand that failure to complete the setiming of the receipt of allowable compensations of the receipt of allowable compensation Cleara weekdays between 7am-4:30pm.	be audited g your sepa eparation p ation (unus	by the unaration/re rocess and sed accrue	iversity or its' representatives. Pleas tirement. I submit the Separation Clearance Fo d vacation and/or sick time) in my fi	orm will affect the	
Employee's Signature:				Date:	
Business Manager's Signature:				Date:	