

SOUTHERN UNION STATE COMMUNITY COLLEGE EMPLOYEE EXIT FORM

Employee Name (print or type)

Date of Separation

Submit the following college property to supervisor	N/A	EMPLOYEE INITIAL	SUPERVISOR INITIAL
1. College-owned books and grade books			
2. College-owned tools and/or equipment			
3 Materials to the Learning Resources Center			
4. Parking decal and employee badge			

Contact the Business Office concerning: final pay check, annual leave payout, PEEHIP Information, and forwarding address.

Employee shall meet with the Office of Human Resources to complete the exit process.

Employee Comments:

My signature below certifies that the applicable procedures listed above have been completed.

Employee Signature

Date

Supervisor Signature

Date

Human Resources Signature

Date