

## Supervisor Termination Checklist Form

Employee Name: \_\_\_\_\_

Position Title: \_\_\_\_\_

Last Day Worked: \_\_\_\_\_

Resignation Letter Received: ☐ Yes ☐ No

Resignation Letter Sent to HR?: ☐ Yes ☐ No

Reason for Leaving: \_\_\_\_\_

Forwarding Address (if applicable)

On or before employee's last day please obtain the following items (if applicable):

Item	What to do
<input type="checkbox"/> Keys	Return to Physical Plant (Alan Coad – <a href="mailto:coad@lemoyne.edu">coad@lemoyne.edu</a> )
<input type="checkbox"/> Hanging parking tag and/or parking sticker	Return hanging parking tag to HR; throw away sticker
<input type="checkbox"/> Laptop/ipad/other electronic device	Return laptop/ipad to service desk in the library
<input type="checkbox"/> ID card/card access	Cut up card*
<input type="checkbox"/> Credit card	Cut up card

\*Employee's retiring from the College retain ID card access.

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return form to the Office of Human Resources  
email: [lemoynehr@lemoyne.edu](mailto:lemoynehr@lemoyne.edu) or campus mail (GH 209C)