FULLERTON COLLEGE
EMPLOYEE EXIT CHECK-OUT FORM

Employee Name: ____________________________________________

Division/Department: _______________________________________

Last Day of Employment: ____________________________________

Employee:
Prior to last day of employment (or last day on campus, if earlier), please fill out this form in accordance with NOCCCD AP# 7350, 3.0 and turn in to your Immediate Management Supervisor.

- Keys/FOBs turned in: __________________________________________ (Signature of Facilities Staff) (Date)

- Items to turn in to Immediate Management Supervisor (where applicable):
  Computer/Laptop ________ Parking Permit ________
  Cell Phone ________ Other Division Materials ________
  Radio ________ Other ________
  Tools/Uniforms ________

By signing below, employee acknowledges that all college property has been turned in:

Employee Signature: ________________________________________ Date: _________

If applicable, please include forwarding address:
________________________________________________________________________
________________________________________________________________________

Manager:
- Obtain email confirmation from Library Circulation Staff regarding fines: ________
- Obtain email confirmation from Admissions and Records regarding grades: ________
- Email Academic Computing if requesting email continuation for retiree: ________

Manager’s Signature: ________________________________________ Date: _________

Notes:
________________________________________________________________________
________________________________________________________________________

Please forward the completed form to the Personnel Services Specialist in the Business Office