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

Rev. 10/9/2008