

Actual Last Day Worked: _____ / _____ / _____

Employment Termination Checklist

⇒ Date of Notice/Separation: _____ / _____ / _____ 2 Weeks? Y N N/A
Or 2-Week Equivalent

If provided, attach Resignation Letter.
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⇒ Last Name: _____

⇒ First Name: _____

⇒ Department: _____ Job Title: _____

⇒ Status: PT-Hourly_____ FT-Hourly_____ FT-Salary_____ Temp_____ Casual_____

Benefits Eligible: _____Yes _____No. If yes, Benefits End: _____

Address to Mail Future Correspondence (W-2, etc.):

⇒ Address: _____

City: _____ State: _____ Zip: _____

⇒ Record Last Known Telephone Number: (_____) _____ - _____

⇒ Reason for Termination:

- Discharge** Reason: _____
- Temporary Layoff**
- Permanent Layoff** **Obtain Resignation Letter if Retiring or Voluntary Quit**
- Retired**
- Voluntary Quit**

⇒ **Last Day Scheduled to Work:** _____ / _____ / _____

- Y N **Regular Pay** Less Auth. Deductions.
- Y N **APL Pay** According to Policy
- Y N **Severance Pay** If applicable, per agreement.

⇒ Company Key/Equipment/Access Properly Returned/De-Activated:

- | | | |
|--|--|---|
| <input type="checkbox"/> Keys (see list) | <input type="checkbox"/> Desktop Computer | <input type="checkbox"/> Terminate Email |
| <input type="checkbox"/> Fobs (see list) | <input type="checkbox"/> Laptop Computer | <input type="checkbox"/> Modify Voicemail |
| <input type="checkbox"/> Safe (see list) | <input type="checkbox"/> Cell Phone | <input type="checkbox"/> Personal Items Removed |
| <input type="checkbox"/> Credit Card(s) | <input type="checkbox"/> Server/VPN Access | <input type="checkbox"/> Remove Alarm Access |

⇒ Eligible for Rehire? Y N Comments: _____

⇒ Human Resource Functions:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Notify Pastor/DPL | <input type="checkbox"/> Remove from Phone List | <input type="checkbox"/> Remove from Bulletin | <input type="checkbox"/> Status Change Form |
| <input type="checkbox"/> Notify Council Chairs | <input type="checkbox"/> Attach Equip/Tech Issue | <input type="checkbox"/> Attach Key/Access Issue | <input type="checkbox"/> Unemployment Info (UIA Form 1711) |
| <input type="checkbox"/> Notify Diocese | <input type="checkbox"/> Initiate Lay Retirement | <input type="checkbox"/> Remove Website | <input type="checkbox"/> Attach Resignation & Accept Letters |
| <input type="checkbox"/> Terminate in Paycor | <input type="checkbox"/> Notify MCC | <input type="checkbox"/> Remove Group Email | <input type="checkbox"/> Personnel File to Terminated |
| <input type="checkbox"/> Exit Interview | <input type="checkbox"/> Final Paycheck/APL Brief | <input type="checkbox"/> Inform employee of Life Insurance Conversion (if applicable) | |

⇒ Administrator Signature: _____ Date: _____ / _____ / _____

Form Instructions

- Complete all items as much as possible.
- Line through the item if it does not apply.
- Check-off the item when it is completed.
- Once completed, file the checklist with the employee's record.
- Unemployment Infor (UIA Form 1711) is for involuntary terminations.