

**FOR HUMAN RESOURCES
EMPLOYMENT OFFICE
USE ONLY**



FACULTY/STAFF EXIT PROCEDURE

___/___/___ Termination Date

Please pay out paid leave bank

___ . ___ hours
(Payroll – please verify)

___ days

Farewell Check to be processed

NO Farewell Check

Employment Manager Signature

Please let us take this opportunity to say **THANK YOU** for the valuable contributions you have made to Andrews University and its mission.

In order to ensure a smooth transition from Andrews University, please complete this form with the appropriate information and signatures to do a final “check out”. This form details the appropriate exit procedure process and will not only assist us in clearing necessary records but will also ensure that you receive your last check in an accurate and timely manner.

When completed, please submit the completed form to the Human Resources Employment Office, Room 213, in the Administration Building. If you have questions as you complete the form, please call ext. 3570.

Thank you for your assistance, time and effort in completing this process!

We want to wish you God’s blessings and good health in your new endeavors.

Exit Procedure

ID# _____

Name _____, _____
Last First

New Address: _____

FACULTY ONLY – Academic Records

Yes / No _____ Grades Turned in

Yes / No _____ Registrars Office Given Authorization for Future
Grade Changes

Yes / No _____ Registers Turned into Archives

FACULTY, SALARIED AND HOURLY STAFF

Last day of Work ____ / ____ / ____
mm/dd/yy

Unused Vacation time - accrued # of:

Days (salaried) _____ Hours (hourly) _____

Yes/ No _____ Salary staff entered vacation time in LeaveReport

(Supervisor's Signature)

- I will be continuing in denominational work.
- I will not be working for the denomination.

FACULTY, SALARIED AND HOURLY STAFF

Please turn in the appropriate items and obtain a signature from each office indicated below. A **signature must be obtained from each office whether or not you have the item referred to.** Circle "Yes" if you completed the named task, or "No" if it did not apply to you

Yes/ No _____ Salary staff entered vacation time in LeaveReport

Yes / No _____ Disable Email Account (ITS)

Yes / No _____ Return Keys (Plant Administration 107)

Yes / No _____ Update Information (Academic Records 207)

Yes / No _____ Cleared Account (Treasurer 221)

Yes / No _____ Insurance Card (Benefits 216)

Yes / No _____ Cancel Direct Deposit (Employment 213)

Yes / No _____ Return ID Card (HR Employment 213)

*Telephone calling cards and access to Banner and/or Redwood accounts will be disabled automatically, unless prior arrangements are made. In addition, library books that you have checked out will need to be returned.

This is to verify that I am voluntarily resigning/retiring my
employment with Andrews University as of ____/____/____
mm dd yy

Optional comments or suggestions: _____

Signature: _____ Date _____

We sincerely appreciate the contribution you have made to Andrews University and pray for the best in your new endeavors!