

## EMPLOYEE DEPARTMENTAL EXIT CHECKLIST

NAME	LAMAR ID
TITLE	DEPARTMENT
INVOLUNTARY SEPARATION YES or NO	LAST DAY WORKED
Step 1 Complete By Department: Submit Separation Notification Form https://www.lamar.edu/forms/human-resources/separation-notice.html Complete EPAF	Step 2 Human Resources Received: Exit Interview Checklist Vacation/Sick Leave Form End Job Assignment EPAF
Verify: • LU Finance, 880-8932 Money owed to LU Traffic Tickets • LU Finance, 880-8383 Travel Advances (Supervisor will receive an email confirmation after Travel Part is contracted.)	Step 3 Benefit Coordinator reviews with Employee:         Clarification of:
<ul> <li>Travel Dept is contacted.)</li> <li>Library, 880-8134</li> <li>Library Books unreturned</li> </ul>	Health/Dental (retiree) Life Insurance (retiree) COBRA Information Final Pay Check Change of Address (as needed) Transfer of Benefits (transfer only)
Collect: Letter of Resignation (if provided) Computer Equipment (Notebook, Printer)* Cell Phone/MiFi Modem* Tools/Safety Equipment Assigned Keys	HR Benefits Staff Signature Date
Uniforms Credit Card/ProCard* Parking Pass* Employee I.D. Card/Clinical I.D. Card*/Gate Cards	Forwarding Address: City:State: Zip:
Passcode for Voice Mail Final Travel Voucher(s)	Personal Email:
<ul> <li>Email the following to <u>HR@lamar.edu:</u></li> <li>Completed &amp; Signed Exit Checklist</li> <li>Resignation Letter</li> <li>Vacation/Sick Leave Form F3.6 (monthly employees) <u>https://www.lamar.edu/faculty-staff/files/documents/human-resources/forms/leave/f3.6-blank-form-lu.pdf</u></li> </ul>	Last check will be:Mailed to the address Continue Direct Deposit
By signing this form, you are certifying that all items in above have been addressed.	
Supervisor Signature Date	HR Generalist Signature Date
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