**Termination of Employment Checklist**

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| Name: | Department: |
| Job Title: | Line Manager: |
| Start date: | Last day worked:  Termination of employment date: |
| Reason for termination of employment | |
| * Acknowledgement of resignation letter sent? * Exit interview carried out? * Company property returned? * Company swipe card/pass returned? * Uniform returned? * Computer access cancelled? * Email account cancelled? * Removed from phone list? * Benefits cancelled? * Confirm contact information: | |
| Final payments   * Holiday pay: * Bonus/commission: * Outstanding loan:   N.B. Confirm all deductions with employee. Note any deductions. | |
| Notes | |