**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:
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| Final payments* Holiday pay:
* Bonus/commission:
* Outstanding loan:

N.B. Confirm all deductions with employee. Note any deductions.  |
| Notes |