

The following form(s) can be filled in on-line, then printed for signatures and mailing or faxing.

To begin filling out the forms in Acrobat Reader, make sure the '**hand**' tool is selected then click on a line or in a box and begin typing. Check boxes can be clicked on or off.



# CCS Human Resources Office (HRO) EMPLOYMENT SEPARATION CLEARANCE

Joint completion and timely routing of this form by employee and his/her supervisor is mandatory prior to issuance of the employee's final paycheck.

Employee name \_\_\_\_\_ Last working day \_\_\_\_\_

Contact/forwarding address \_\_\_\_\_

**Employee category:**     Faculty                       Classified                       Professional exempt                       Administrator  
     Hourly/adjunct                       Full time                       Part time

**Work location:**     SCC                       SFCC                       IEL                       District

Division/department \_\_\_\_\_ Supervisor \_\_\_\_\_

Retirement                       Resignation\*                       Dismissal\*\*                       Other: \_\_\_\_\_

**EXIT INTERVIEW**  
(completed and documented on CCS Exit Interview form):

Date \_\_\_\_\_ Conducted by:     Supervisor                       Chief Human Resources Officer (or designee)

\* **To the supervisor:** For employee separation based upon RESIGNATION, please have employee complete the following section of the form.

**To the employee:** Please check any of the following that contributed to your decision to leave your current position:

<input type="checkbox"/> To accept other employment	<input type="checkbox"/> Self-employment	<input type="checkbox"/> Moving from this area
<input type="checkbox"/> Domestic responsibilities	<input type="checkbox"/> Health	<input type="checkbox"/> Better job opportunity
<input type="checkbox"/> Military service	<input type="checkbox"/> Content of work	<input type="checkbox"/> Lack of opportunity for advancement
<input type="checkbox"/> Better fringe benefit package	<input type="checkbox"/> Working conditions	<input type="checkbox"/> Salary
<input type="checkbox"/> Commuting distance	<input type="checkbox"/> Family circumstances	<input type="checkbox"/> Attending college
<input type="checkbox"/> Personal reason		
<input type="checkbox"/> Other _____		

\*\* **To the supervisor:** For employee separation based upon DISMISSAL, please complete the following section of the form.

Check ONE box only:

Inability to perform the essential elements of the position                       Lack of work                       Misconduct  
 Rule violation                       Other \_\_\_\_\_

Please make copies of completed form and distribute as follows:    Original—HRO, MS 1004    Copy—Supervisor    Copy—Employee

**IT IS THE SUPERVISOR'S RESPONSIBILITY TO TAKE THE FOLLOWING MEASURES WHEN THEIR EMPLOYEE WILL BE LEAVING CCS EMPLOYMENT:**

(If space on form is inadequate, attach list.)

**1. Collect the following items by the last day of employment (if item is not applicable, mark "N/A" in "Suprv. Init." column):**

Item	Individual to Contact	List Items (as applicable)	Date	Suprv. Init.
<b>Employee notice of retirement or resignation</b>	Submit to administrator and Human Resources		To administrator:	
			To Human Resources:	
<b>Key(s)</b> (Contact appropriate individual to determine key(s) assigned to employee)	SCC—Div. Dean      Dist—8630 SFCC—Campus Security IEL—3761		Collected/returned to appropriate college source:	
<b>State Property</b>	(Verify assignment of equipment by contacting Inventory, 533-4782; provide employee's building/room number)		Collected from employee:	
<b>Security Identification</b> (e.g., badge, ID card)			Collected from employee:	
<b>Telephone Clearance</b> (long distance access card; cellular phone; pager; voice mail)	Notify Telephone Services, 533-8150, of employee's last working day at CCS		Telephone Services notified:	
			Item(s) collected and returned to Telephone Services:	
<b>Travel Items</b> (travel advance, etc.)	SCC—7075 IEL—Division Dean office SFCC—Bldg. Secty.    District—7438		Collected/returned to appropriate college source:	
<b>Other Clearance Item(s)</b>				

**2. Notify each (A-C) of the Information Services contacts of employee's last working day at CCS.**

Information Systems Item	Contact	Date Information Systems Contact Notified	Suprv. Init.
A) HP 3000 Log-on Security	Information Systems—8013		
B) HP 3000 Application Security	Call appropriate contact: SCC—8013      IEL—6010 SFCC—8013      District—8013		
C) •LAN Network Security •LAN E-Mail Address(es) •Other Information Systems access items	Call appropriate contact: SCC—7411      IEL—6010 SFCC—4357      District—8013		

Employee's signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor's signature \_\_\_\_\_ Date \_\_\_\_\_