



## Employment Termination Form

Date

Name:

First, middle, last as appears on Social Security Card

Current Title/Rank:

Current Department:

Last Day Present on Job:

Termination Date:

(Last Day on Payroll)

Reason for Termination:

Attend School

Retirement

3 Day Absence without notice

Non-renewal of Contract

Resigned (Letter must be submitted to the Supervisor)

Accept other employment with

Reason Unknown

Discharge (documentation must be attached)

Death

Other (Specify)

### EXIT CHECKLIST

1-) Returning all Library Materials(if applicable)

Librarian

Date

2-) Returning All Keys

Building Supervisor

Date

3-) Returning Computers and Closing Computer Accounts

Chief Technology Officer

Date

4-) Zero Balance on accounts

Business Office

Date

Mailing address of the employee

(All forms (W2s, Cobra letters, etc.) will be mailed to this address. The employee is responsible to update his/her address)

\_\_\_ I give NAU my consent to provide reference information when potential employers call.

\_\_\_ I have understood my rights and the procedure to continue medical coverage under COBRA for me / my spouse / my children/ my family (circle all that apply) and I have received election for continuation forms.

Employee

Date

Human Resources

Date

7.1.1 Voluntary Separation from Employment Generally, NAU does not pay accrued vacation leave to employees who leave employment voluntarily. Any unused paid vacation leave is forfeited upon an employee's work separation. See employee handbook for details.