



## EMPLOYMENT TERMINATION CHECKLIST

Check one:

Full-time

Part-time

Temporary

Employee Name:

Date of Termination:

Location:

Department:

### INITIAL BELOW:

\_\_\_\_\_ Letter of Resignation from Employee *(To be kept at local office)*

\_\_\_\_\_ Exit Interview *(To be kept at local office & completed for voluntary resignation)*

\_\_\_\_\_ Termination Notice *(Copy to be sent to the HR Director of the Diocese, for approval to terminate, prior to notice of termination)*

\_\_\_\_\_ Notify the local IT Department of the departure immediately

\_\_\_\_\_ Property of the local entity collected *(access card, keys, laptop, cell phone, etc.)*

**Please list each item collected:**

### BENEFITS *(Full-time employees only)*

\_\_\_\_\_ Continuation of Benefits packet given to departing employee on \_\_\_\_\_

(Date)

Name of Person completing form:

Date: