**Checklist: Employee Termination**

**Employee name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Department:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Termination date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Type of Termination**

*Voluntary:*

Received employee’s resignation letter. (If verbal resignation, provided employee with a written confirmation of resignation).

Exit interview scheduled.  Exit interview completed.

*Involuntary:*

Provided employee with termination letter.

Provided employee with severance agreement if eligible.

Received signed severance agreement.

Provided employee with WARN notice (if applicable).

**Benefits**

Provided employee with termination/continuation of employment insurance benefits information (COBRA, life insurance, supplemental insurance, etc.)

Checked FSA/HSA participation and informed employee of remaining funds and reimbursement deadlines, if applicable.

Checked dependent care FSA participation and informed employee of remaining funds and reimbursement deadlines, if applicable.

Checked PTO balance and informed employee of any remaining PTO and how it will be processed at termination of employment.

Informed employee about retirement plan account options.

**Compensation**

Provided notice of policy regarding any outstanding balances for money owed to company (e.g., educational loans/pay advances).

Notified payroll department to process final paycheck.

Informed payroll of any unused but earned PTO amounts due to the employee.

Notified payroll to process severance pay and whether lump sum or salary continuation (if applicable).

**Contracts/Legal**

Provided written notice to employee of any legal obligations that continue post-employment (e.g., noncompete/confidentiality agreements/employment contracts).

**Immigration**

Notified company immigration attorney of termination if employee is on a temporary work visa.

**Records**

Pulled personnel file to be stored with terminated employee files.

Pulled Form I-9 to be stored with terminated employees’ I-9s.

Obtained written authorization from employee to respond to employment verification requests.

**Information Technology**

Disabled e-mail account.

Removed employee’s name from e-mail group distribution lists; internal/office phone list; website and building directories.

Disabled computer access.

Disabled phone extension.

Disabled voicemail.

**Facilities/Office Manager**

Disabled security codes, if necessary.

Changed office mailbox.

Cleaned work area and removed personal belongings.

Collected the following items:

Keys ( office  building  desk  file cabinets  other)

ID card

Building access card

Business cards

Nameplate

Name badge

Company cell phone

Laptop

Uniforms

Tools

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form completed by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_