

2018 EMPLOYEE EXIT CHECKLIST



Employee Name: _____

Supervisor Name: _____

Directions: This form is to assist supervisory personnel when an employee terminates his/her employment from the Department of Livestock. The supervisor is to meet with the employee and discuss the following items on or before the final day of employment. As each listed item is discussed with the exiting employee the person responsible is to initial in the spaces provided to indicate that he/she has handled each item appropriately. If any item does not apply, indicate with "N/A". If the supervisor or the employee needs assistance, one or both should contact Sheila Martin at 444-5684.

| SUPERVISOR : | | *** Supervisor must Initial*** |
|--|--|---------------------------------------|
| Resignation letter (original to HR, copy to Payroll) | | |
| Department access ID Card (return to HR) | | |
| Keys (building, office, desk, state/motor pool car) | | |
| State owned property returned (computers, uniform, equipment, work documents, supplies, vehicle) | | |
| Cell phone (supervisor return to Purchasing/Equipment Tech in Helena) | | |
| Credit card (supervisor return to Purchasing/Equipment Tech in Helena) | | |
| Fuel Card (supervisor return to Purchasing/Equipment Tech in Helena) | | |
| Access to voicemail system (must reset password to last 4 digits of phone number) | | |
| SOP's completed for critical duties ? | | |
| Review and update job description | | |
| Pending Projects list completed? | | |
| Notify IT for removal from Computer/Email systems and the effective date <u> </u> / <u> </u> / <u> </u> | | |
| Final Expense Report completed and approved | | |
| Have employee complete final timesheet | | |
| Update org chart | | |

| HUMAN RESOURCES: | | *** HR must Initial*** |
|--|--|-------------------------------|
| Conduct Exit Interview (voluntary, use form) | | |
| W-4 form to change withholding amount due to payout (optional, self-service) | | |
| Insurance/COBRA (DOA will send information regarding eligibility) | | |
| Member of VEBA (?) Paperwork completed and returned to VEBA MANAGER/DOA | | |
| If already set up w/direct deposit, last check will be direct deposited | | |
| Letter of employment verification completed for exiting employee | | |
| Resignation letter in personnel file | | |
| VEBA Enrollment Form | | |

EMPLOYEE EXIT CHECKLIST



| PAYROLL / ACCOUNTING: | | **** Payroll must initial**** |
|---|--|-------------------------------|
| Copy of Resignation letter for file | | |
| Travel advances reconciled | | |
| Termination of employee on SABHRS | | |
| Termination pay out --verify leave balances (Payroll Clerk) | | |
| --1/4 of sick leave | | |
| --vacation | | |
| --FLSA comp time (no pay out for exempt) | | |
| --Double check if payout is coded for VEBA(?) | | |
| Final timecard completed? | | |
| Forwarding address & Phone | | |
| <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> | | |

| INFORMATION TECHNOLOGY: | | ****IT must initial**** |
|---|--|-------------------------|
| Remove from Computer/Email systems and the effective date <u> </u> / <u> </u> / <u> </u> | | |
| Remove from SABHRS systems and the effective date <u> </u> / <u> </u> / <u> </u> | | |
| Secure/back-up all employee data: | | |
| --External Hard Drives | | |
| --USB Drives | | |
| --Laptops | | |
| --Tablets | | |
| --Phones | | |
| --Emails | | |
| | | |
| | | |

EMPLOYEE EXIT CHECKLIST



An employer may not withhold a final check. However, in order to avoid disputes or disruptions in pay, workers are advised to turn in keys, uniforms, tools and equipment upon termination.

<http://erd.dli.mt.gov/labor-standards/wage-and-hour/wage-payment-act/5-erd/labor-standards/162-wage-and-hour-faq.html>

I certify that the above checked items have been discussed or received.

| | | |
|------------------|-----------|-------|
| _____ | _____ | _____ |
| Exiting Employee | Signature | Date |
| _____ | _____ | _____ |
| Supervisor | Signature | Date |
| _____ | _____ | _____ |
| HR | Signature | Date |