This form is to be used when a staff member is leaving their employment with the University to ensure any necessary tasks are FRPSOHWHG SULRU WR RUen ROWNWIKH VWDII PHPEHU¶V ODVW GD\ RI

STAFF MEMBER DETAILS		
Staff	ID. Position Title	
Staff ID:Position Title:		
School/Branch:		Work phone:
Title:_	Family Name:	Given names (in full):
Last day of employment (end date after any leave which is taken prior to leaving):		
CHECKLIST DETAILS		
No		Actions Y N N/A
1	I have completed the Resignation Advice Form specifying my last day of employment	
2	I have applied via SSO for any leave I am intending to take prior to my resignation/retirement	
3	I have returned all University property inclu	uding:
	Laptop other electronic devices	Motor vehicle
	Car park permit	Mobile phone
	Building access/staff ID card	Library Books
Credit Cards Research documents etc		