



CAMPUS CLEARANCE PROCEDURES

EMPLOYEE NAME: _____

Prior to leaving campus, it is necessary to obtain clearance signatures from the offices listed below. For W-2 purposes, please keep us informed of any future address changes. **Return this form to Human Resources IH 205 when completed.**

ACCOUNTS RECEIVABLE - IH 119
(Phone cards, petty cash)

Signature _____ **Date** _____

AUDIO VISUAL - IH 001
(AV equipment)

Signature _____ **Date** _____

ACCOUNTS PAYABLE - IH 206
(Advances, credit cards)

Signature _____ **Date** _____

PHYSICAL EDUCATION - QC 126
(Locker)

Signature _____ **Date** _____

PHYSICAL PLANT
(Keys)

Signature _____ **Date** _____

PIERCE LIBRARY - PL Circulation Desk
(Library Books)

Signature _____ **Date** _____

IT & TELECOM DEPT. - IH 008
(Telephone change, Email)

Signature _____ **Date** _____

TIM WILSON - IH 204
(FIS/HRIS, Approval Queues)

Signature _____ **Date** _____

HUMAN RESOURCES - IH 205
(Return this form)

Signature _____ **Date** _____

Check below if you would like information on the continuation of insurance. Some restrictions may apply.

- Life Insurance**
- Retiree Life Insurance** (Ask for Retiree Life Insurance Option Info & Application)
- Long Term Care Insurance**

Final Check Disposition: **Direct Deposit** **Mail** **Pick Up**

FORWARD FIRST CLASS MAIL TO: _____

You may release my address: **Yes** **No**

Phone # _____

Employee Signature: _____