

MCAD STAFF EXIT CHECK LIST (VOLUNTARY)

Please review this form with your employee. Verify with specific departments that all MCAD items, equipment, etc. have been returned prior to employees last day of work. Please return completed form to Human Resources (human_resources@mcad.edu or drop box outside M16).

Full employee name:	
Position Title:	
Department (# and name):	
Date employee gave notice:	
Last worked day:	
Employee home address:	
Employee home phone:	
Employee personal email:	

On or before your employee's last day of work please review this form with your employee, collect MCAD items, equipment. Contact departments to inquire whether the employee has checked out items/equipment. Please complete for all items. For items that are not applicable, please indicate by listing "N/A" under the Signature column.

Item	Action	Department/Signature	Date Completed
MCAD Keys	Collect /Return to Facilities		
I.D Card	Collect/Return to HR		
Credit Card	Collect/Return to Business Office		
Amazon Business Account	Collect/Return to Business Office		
Computer Equipment	Collect/Return to Technology		
User ID's & Passwords			
Media Equipment	Contact Department/ Equipment Returned		
Library	Contact Department Items Returned		
3-D Shop	Contact Department Equipment Returned		

I have returned all of the above, including all documents and electronic devices, and have not made copies of such records:

_____/_____/_____
Employee Signature Date

I have collected all of the above, and returned all items to the represented departments.

_____/_____/_____
Supervisor Signature Date