

VOLUNTARY RESIGNATION CHECKLIST

Employee Name: _____
Job Title: _____
Resignation Date: _____ Employee Number: _____

NOTIFICATION RECEIVED

- _____ Resignation/Termination Received
- _____ Oral Notice Received

ACTION TAKEN

- _____ Payroll Status Change Form Completed
- _____ Notification of Appropriate Personnel – Board of Trustees, Supervisor, Director, Fiscal Officer, Security, Personnel
- _____ Determine Last Day of Work
- _____ Determine Last Day of Pay
- _____ Determine Last Day of Benefits
- _____ Schedule Exit Interview
- _____ Notify OPERS
- _____ Remind Employee to contact OPERS to Discuss Benefit Options
- _____ Prepare COBRA letter and Certificate of Credible Coverage (if applicable)
- _____ Terminate from other Employee Benefits (if applicable)
- _____ Collect Library Property
(name tag, keys, credit card, laptops, access code cards, etc)
- _____ Have Employee Submit Final Expense and/or Credit Card Statement
- _____ Forward or Change Voice Mail Box Access Codes
- _____ Change Passwords on Computers
- _____ Notify Critical Vendors
- _____ Clean Out Desk/Mailbox
- _____ Remove From Staff Lists and Website i(f applicable)
- _____ Change ILS System Record to Non-Staff
- _____ Process Final Paycheck
- _____ Establish a Procedure for Reviewing Incoming Mail, Phone Calls and E-Mails
- _____ Reassign Supervisor Authority (if applicable)
- _____ Reassign work as Appropriate
- _____ Cancel Organizational Paid Subscriptions or Memberships in Professional Organizations (if applicable)