

SEPARATION FROM EMPLOYMENT

PART-TIME OR STUDENT EMPLOYEE

UNIVERSITY ENTERPRISES, INC.
 HUMAN RESOURCES
 BOOKSTORE BUILDING
 6000 J STREET, SUITE 3900
 SACRAMENTO, CA 95819-6063
 (916) 278-7003

**THIS SECTION MAY BE COMPLETED BY THE
 EMPLOYEE AND/OR THE SUPERVISOR**

PLEASE SUBMIT TO UNIVERSITY ENTERPRISES HUMAN RESOURCES ON OR BEFORE EMPLOYEE'S LAST DAY WORKED – OR WITH **FINAL TIME REPORT (IF NOT SUBMITTED IN ADVANCE)**.

LAST NAME, FIRST NAME MIDDLE NAME			EMPLOYEE ID #		
AGENCY/DEPARTMENT		ACCOUNT NUMBER		<input type="checkbox"/> RESIGNED <input type="checkbox"/> DISCHARGED** <input type="checkbox"/> OTHER (EXPLAIN BELOW)	
POSITION/TITLE		LAST DAY WORKED – REQUIRED		<input type="checkbox"/> DROPPING ACCOUNT/DEPT - STILL EMPLOYED WITH UEI AT _____	

**IF EMPLOYEE IS DISCHARGED – PLEASE CALL HUMAN RESOURCES FIRST

SECTION 1 ~ EMPLOYEE

REASON FOR SEPARATION (PLEASE EXPLAIN FULLY): _____

FINAL PAYCHECK (CHOOSE ONE):	NEW ADDRESS - (IF DIFFERENT THAN PERMANENT ADDRESS FOR PURPOSES OF MAILING W-2 FORM ONLY)			
<input type="checkbox"/> PLEASE ISSUE MY FINAL CHECK ON THE REGULAR PAYDAY	STREET ADDRESS		APT #	
<input type="checkbox"/> PLEASE PREPARE A MANUAL CHECK* (WE ARE UNABLE TO DIRECT DEPOSIT MANUAL CHECKS) <i>SUPERVISOR'S INITIALS FOR MANUAL CHECK</i> _____	CITY	STATE	ZIP	PHONE

*IF REQUESTING A MANUAL CHECK, PLEASE CALL HUMAN RESOURCES AT (916) 278-7003 IMMEDIATELY

X _____
 EMPLOYEE SIGNATURE DATE

SECTION 2 ~ SUPERVISOR

	<u>N/A</u>	<u>Yes</u>	<u>No</u>	
EMPLOYEE ELIGIBLE FOR REHIRE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(If no, please explain below.)
KEYS RETURNED (IF APPLICABLE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
UNIFORM RETURNED (IF APPLICABLE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TRAVEL ADVANCES CLEARED (IF APPLICABLE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

COMMENTS: _____

PRINTED NAME OF SUPERVISOR PHONE EMAIL ADDRESS

X _____
 SUPERVISOR / MANAGER SIGNATURE DATE

UNIVERSITY ENTERPRISES USE ONLY

APPROVAL _____ HUMAN RESOURCES DATE _____	MANUAL CHECK # _____ PAYROLL DATE _____
PROCESSED BY _____ DATE _____	PROCESSED _____ DATE _____