

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER
CMHC SEPARATION CHECKOUT**

Name of Separating Employee: _____

Employee ID Number: R _____

Position Title: _____

Email: _____

Department: _____

Location/Campus: CMHC _____

Immediate Supervisor**: _____

Date of Separation: _____

VERIFYING SIGNATURE

DATE

Human Resources: _____

Retirement _____

Insurance _____

Supervisor/HR:

Building Keys/Access Card _____

Supervisor/HR:

TDCJ ID Badge _____

CMHC ID Card _____

TTUHSC ID Badge (If applicable) _____

**** It is the supervisor's responsibility to ensure that employee access to all internal systems is disabled.**

This form must be completed and returned to the Human Resources Office (CMHC) in order not to delay processing of retirement funds. Employees on Lubbock, Odessa, El Paso, and Amarillo campuses should forward this form (or the campus alternate form) through their Human Resources office.