

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

Name of Separating Employee: _____
 Employee ID Number: _____
 Position Title: _____
 Email: _____
 Department: _____
 Location/Campus: _____
 Immediate Supervisor**: _____
 Date of Separation: _____

**VERIFYING
DEPARTMENT**

SIGNATURE

DATE

Human Resources: _____
 Retirement _____
 Insurance _____
 Final Time Sheet _____
 Employment _____

Plant Operations - Lockshop:
 HSC Building Keys _____

Police Department:
 Employee ID _____

Traffic & Parking: _____

Payment Services:
 Procurement Card: _____
 Corporate Travel Card _____
 Travel Account: _____

Information Technology Division: _____

HSC Library: _____

Clinic Business Office:
 IDX User ID _____
 Account Balances _____
 Billing Information _____

Electronic Medical Records _____

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