



CENTRAL TEXAS COLLEGE
Employee Clearance Form

DATE: _____

EMPLOYEE'S CAMPUS: _____

EMPLOYEE'S DEPT: _____

The following employee is cleared for final paycheck and/or vacation payout upon completion of this clearance form. Verification that the employee owes no debt, has returned all issued property, and has been removed from all employee lists and access passwords as required.

Employee Name: _____ Job Title: _____

Full-time - Part-time - Colleague ID#: _____

Mailing Address: _____ Telephone #: _____

***NOTE: PLEASE CALL TO ENSURE SOMEONE WILL BE IN THE OFFICE TO CLEAR YOU**

Bldg	Office/Dept	Room	Phone/Ext	Signature	Date
Employee's Supervisor:	* (Supervisor – Please contact the IT Help Desk for instructions on disabling email password & Colleague Access).				
	*Return CTC uniforms (if applicable).				
	Employee's Dean or Director				
102	Library	108	1237		
108	Risk Management: * To remove drivers from approved driver's list.	100	1739		
108	Resource Management * Credit Card Holders Only.	100	1331		
119	Business Office	102/104	1217		
137	Campus Police ** Return Parking Permit & Turn in Building/Room Keys	104	1200		
139	IT Help Desk	145	501-3103		
103	Employee Benefits	130	1307		
103	Pension Plan	129	1807		
103	Employee Training	151	1333		
103	Payroll Services	150	1123		
103	Employment Services **Return completed form and Employee ID card to this office.	113	1124		

I have read and understand the above instructions. I acknowledge that I owe no outstanding debts to CTC and have returned all property issued by CTC. I understand that failure to comply with these instructions will delay receipt of my final paycheck and I agree to have funds taken out of my final paycheck for any outstanding debt owed to CTC.

Date

Employee Signature