

Employee Exit Clearance Form Word

Employee Information

- Full Name: _____
- Employee ID: _____
- Department: _____
- Job Title: _____
- Exit Date: _____

Departmental Clearance

Manager/Supervisor

- Manager's Name: _____
- Signature: _____
- Date: _____

Checklist

- Return of company property
- Completion of all projects
- Handover of work

Human Resources Clearance

- HR Manager: _____
- Signature: _____
- Date: _____

Checklist

- Conduct exit interview

- Process final payment
- Benefits explanation

IT Department Clearance

- IT Manager: _____
- Signature: _____
- Date: _____

Checklist

- Revoke access
- Collect IT assets
- Secure data

Finance Department Clearance

- Finance Manager: _____
- Signature: _____
- Date: _____

Checklist

- Settle expenses
- Return financial tools
- Clear dues

Final Sign-Off

- Approved by: _____
- Signature: _____
- Date: _____