**Employee Resignation Clearance Form**

**Personal Information**

* **Employee Name: \_\_\_\_\_\_\_\_\_\_**
* **Job Title: \_\_\_\_\_\_\_\_\_\_**
* **Department: \_\_\_\_\_\_\_\_\_\_**
* **Supervisor Name: \_\_\_\_\_\_\_\_\_\_**
* **Last Working Day: \_\_\_\_\_\_\_\_\_\_**

### **Exit Checklist**

**A. Office Assets
☐ Laptop & Accessories Returned
☐ Mobile Phone & SIM Card Returned
☐ Stationery & Office Supplies Returned
☐ Business Cards Destroyed**

**B. IT and Data Access
☐ Email & System Access Revoked
☐ File Transfer Completed
☐ Official Documents Returned**

**C. Financial Clearance
☐ Final Salary Processed
☐ Tax & Benefit Deductions Cleared
☐ Expense Reimbursements Settled**

### **Supervisor Comments (if any):**

### **Signatures**

| **Department** | **Supervisor Name** | **Signature** | **Date** |
| --- | --- | --- | --- |
| **IT Department** |  |  |  |
| **HR Department** |  |  |  |
| **Finance Department** |  |  |  |

**Final HR Review
HR Representative: \_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_
Signature: \_\_\_\_\_\_\_\_\_\_**