TRANSFER/SEPARATION CHECKLIST

(To Be Facilitated by Manager)

Employee Name	University Employee Identification
College/Department	
(Please check when task is completed and proper	ty is returned; Indicate N/A if not applicable)
Employee to Return:	
Is or has employee ever been a CSU student?	P □ Yes □ No
Complete Termination Form	
Keys	
University Employee Identifica	tion
CSU P-Card	
Cell Phone/Pagers/Blackberry	
University Home Computer/Lap	otop
Termination/Transfer Form	
Employee Performance Evalua	tion/Probation Form
Exit Interview	
Files/Other University Property	(Please describe):
N	
NOTICE TO EMPLOYEE	
SUPERVISOR SHOULD READ TO EMPLOYEE:	
EMPLOYEES ARE RESPONSIBLE FOR PAYING ALL DEBT OW	
REDUCED AND/OR LEGAL ACTIONS BEING TAKEN AGAINS	Y. FAILURE TO COMPLY MAY RESULT IN VACATION PAYOUTS BEIN T YOU.
This is to certify that the manager has completed the property indicated above.	e separation transactions and received the University
CSU Manager's Signature/Date	
Copies to: Employee, Office of Human Resources	