

# Departmental Separation Checklist

EMPLOYEE NAME	EMPLOYEE ID
DEPARTMENT	BLAZER ID

HAS THE DEPARTMENT...		AUTHORIZED REP	
		INITIALS	DATE
Advised employee to complete the online <a href="#">Employment Experience Survey</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Advised employee to review <a href="#">Notice of Availability of Unemployment Compensation</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Advised employee to contact the Benefits Office (205-934-3458) regarding retirement, insurance, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Collected from the employee all UAB property in their possession (ID badge, keys, computer/IT equipment, phone/pager, and any other UAB property)	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised the employee to return their parking permit to Transportation Services (205-934-3513 or <a href="http://uab.edu/transportation">uab.edu/transportation</a> )	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised employee to contact HR Records (205-934-4408) to provide forwarding address	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised employee to communicate and work with their supervisor/chair to ensure the work assignments are managed properly prior to their departure	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised employee to forward any incoming phones messages to the appropriate department representative	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised employee to place an "Out of Office" response on the UAB email account and provide appropriate departmental contact information if necessary	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised employee to contact Environmental Health & Safety regarding the handling of controlled materials such as chemicals, lasers, radiation, biohazards	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Advised employee to contact the Research Foundation to review research agreements, patents, intellectual property agreements, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Collected any requests for benefit time for reporting in eLAS	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Collected any travel expense receipts and/or reports, and canceled any travel scheduled but not yet incurred	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Terminated employee's access rights to all UAB Systems	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Contacted Physical Security to deactivate card key access	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Terminated employee's signature authority	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Submitted an ACT document, including all appropriate documentation	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		
Verified that all payroll transactions have cleared	<input type="checkbox"/> Yes <input type="checkbox"/> Not applicable		

The signature below certifies that all separation requirements for this employee have been satisfied.

AUTHORIZED REPRESENTATIVE SIGNATURE	AUTHORIZED REPRESENTATIVE NAME, PRINTED	DATE



HUMAN RESOURCES

The University of Alabama at Birmingham

A copy of this completed form should be submitted for the employee's personnel file in HR Records, AB 254.

Departmental Separation Checklist updated January 2025