

# Employee Exit Clearance Form

Employee's Name:		Designation:
Employee Code:		Department:
Date of Joining:	Date of Resignation:	Last Working Day (Relieving):

The following sections need to be filled and duly signed by authorized representative from the below teams:

	Task(s) to complete	Final Status (Place a ✓ mark)			Remarks	Signature
Manager	Work Transition Completed Files held by Employee Emails: Others (Please Specify):	Yes Returned Auto forwarded	No Not Returned Deactivated	Not Applicable Not Applicable Not Applicable		
Human Resource	Leave Balance Benefits availed Health Card Returned	Yes Yes Yes	No No No	Not Applicable Not Applicable Not Applicable		
ITS	Desktop/ Laptop Cell Phone / Sim card Data Card Other Hardware accessories Remote Connectivity (VPN) Domain Id / Email ID / Emp name from Group ID	Returned Returned Returned Returned Deactivated Auto forwarded	Not Returned Not Returned Not Returned Not Returned Not Deactivated Deactivated	Not Applicable Not Applicable Not Applicable Not Applicable Not Applicable Not Applicable		
Lab	Lab items issued are returned in good condition	Returned	Not Returned	Not Applicable		
Finance	Travel Advances Settlement Relocation Allowance Recovered Other Advances, if any (Please Specify): Income tax supporting docs.	Amt: Amt:	Cleared-Yes/No Cleared-Yes/No Cleared-Yes/No	Not Applicable Not Applicable Not Applicable		
Admin	Cabin/Runner & Storage Keys Stationery Items Office Access Card Employee ID Card Library Books	Returned Returned Returned Returned Returned	Not Returned Not Returned Not Returned Not Returned Not Returned	Not Applicable Not Applicable Not Applicable Not Applicable Not Applicable		
Human Resource	Notice Period To Serve	Notice Period Served	Short-fall in Notice Period	Short-fall in NP to be adjusted	Leave Balance Available Earned Leave: Employee Signature	

**MosChip® Technologies Limited**

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Justification by Manager to be provided here for granting waiver in Notice Period Short-fall (if applicable):			
<b>Provident Fund Settlement</b>	<b>PF Form handed over</b>	<b>Insurance Deactivation</b>	<b>Exit Interview Conducted</b>
Transfer /Closure	Yes/No	Yes / No	HR Representative: Date:
<b>Details for future Correspondence</b>  <b>Phone:</b>  <b>E-mail:</b>  <b>Permanent address:</b>   <b>Reason for Resignation:</b>			

## NOTES:

Full & Final settlement payment will be paid anywhere between **45-60** days from the date of relieving month provided all formalities are completed by the employee.

- Full & Final settlement cheque will be credited to the salary account and the payslip will be sent to the email id mentioned by the employee in the exit clearance form.
- Form-16 will be provided to all the employees after the end of the financial year. The Form-16 will be emailed to the ID mentioned in the exit clearance form. In case of changes, please communicate to HR team, Hyderabad
- Application for PF withdrawal will be submitted to PF office 60 days after the last remittance.
- Please attach all proofs in support of declaration for deduction in income tax along with this form and submit the same to Finance Dept. Also furnish the break up for the same

Particulars	Period		Amount
	From	To	
Rent Receipts			_____
LTA bills			_____
Investment proof			_____

**Employee Signature**

**HR Signature**

**Date:**

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