

EXIT CLEARANCE FORM

NAME: _____

DIVISION/DEPT: _____

I/C No.: _____

DESIGNATION: _____

Please Tick (✓) if applicable.

PASSES	
Employee Pass	<input type="checkbox"/>
CAAS Airport Pass	<input type="checkbox"/>
Carpark Label	
(Airport)	<input type="checkbox"/>
(SLC 2)	<input type="checkbox"/>
Transponder Card	<input type="checkbox"/>
Cash Card	<input type="checkbox"/>
Shell Fleet Card	<input type="checkbox"/>
Staff Medical Card	<input type="checkbox"/>

IT	
System Log On ID	_____
System Log On Password	_____
Windows Log On ID	_____
Windows Log On Password	_____
Screen Save Password	_____
Others : (Pls specify)	
_____ log On ID	_____
_____ log On Password	_____
_____ log On ID	_____
_____ log On ID	_____

Telecommunication			
Pager	<input type="checkbox"/>	No.: _____	
Handphone	<input type="checkbox"/>	No.: _____	Password: _____
Computer Notebook	<input type="checkbox"/>	Password: _____	

Individual	
Locker Key(s)	<input type="checkbox"/>
Drawer Key(s)	<input type="checkbox"/>
Major Stationery (eg. Calculator, Staples machine)	<input type="checkbox"/>

Others (Pls specify)

Exit Clearance Conducted By:

Name: _____

Signature: _____

Designation: _____

Date: _____

Employee's Signature: _____

HR Dept Use Only:

Received by: _____

Date: _____

Remarks: _____