|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **TERMINATION OF EMPLOYMENT CHECKLIST** | | | | | | | | | |  |
| **NAME:** | |  | | **EMPLOYEE NO.** | |  |  |  |  | |
| **REASON FOR LEAVING:** | |  | | **LAST DAY OF EMPLOYMENT:** | |  |  |  |  | |
| **COMMENCED EMPLOYMENT:** | |  | | **LAST DAY OF ACTUAL DUTY:** | |  |  |  |  | |
| **CONTACT DETAILS:** | | **Tel:** | | **Address in UAE:** | |  |  |  |  | |
| **Email:** | |
| **ITEMS TO BE RETURNED** | | | **DEPARTMENT** | | **QTY ISSUED** | | **QTY RETURNED** | **INITIALS** | **COMMENTS** | |
| NA ID card | | | HR | |  | |  |  |  | |
| AUH / ADA Pass | | | HR | |  | |  |  |  | |
| AUH / MOPA Pass | | | HR | |  | |  |  |  | |
| CICPA Pass | | |  | |  | |  |  |  | |
| GHQ Pass | | |  | |  | |  |  |  | |
| HEMS (ADA) / Optima Pass | | |  | |  | |  |  |  | |
| Fazaa Card | | |  | |  | |  |  |  | |
| Medical Insurance Card | | | HR | |  | |  |  |  | |
| DOH License | | | HR | |  | |  |  |  | |
| UAE Driver’s License | | | HR | |  | |  |  |  | |
| Emirates/UAE ID | | | HR | |  | |  |  |  | |
| Laptop | | | IT | |  | |  |  |  | |
| Mobile phone – Blackberry/ Nokia/I-Phone | | | IT | |  | |  |  |  | |
| SIM card | | | IT | |  | |  |  |  | |
| Keys: | Office | | HR / Ops | |  | |  |  |  | |
| Cards: | Parking/ Access | | Ops/ Logistics | |  | |  |  |  | |
| Uniforms (Ops clearance form/email from Supply Chain attached) | | | Ops/ Logistics | |  | |  |  |  | |
| Medical Equipment | | | Ops/ Logistics | |  | |  |  |  | |
| Vehicle (Admin clearance form attached) | | | Fleet | |  | |  |  |  | |
| Outstanding Management Issues *i.e*. Performance Reviews | | | HR | |  | |  |  |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ITEMS TO BE ACTIONED** |  | **ACTIONED BY** | **DATE** | **COMMENTS** |
| IT to remove from   * SMS Broadcast * Biometrics * Distribution Group | IT |  |  |  |
| Deactivation of Email Account | IT |  |  |  |
| Cancel of SIM and Data Plan | IT |  |  |  |
| Cancel Residence Visa | PR |  |  |  |
| Cancel Emirates ID | PR |  |  |  |
| Cancel health insurance | HR |  |  |  |
| Insurance Deduction (if applicable) | HR |  |  |  |
| Cancel DOH License | Licensing & Credentialing |  |  |  |
| Housing Allowance Deduction | HR |  |  |  |
| Update Traffic Fines Charges | Fleet |  |  |  |
| Update Mobile Usage | Finance |  |  |  |
| Training: Text Book return | Education |  |  |  |
| Training: Original Certificates | HR |  |  |  |
| Exit Interview (if applicable) | HR |  |  |  |
| Employment Certificate | HR |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FINANCIAL ISSUES** | | **DETAILS** | | **TO BE REPAID OR DEDUCTED FROM PAY** |
| Final Pay Sheet attached | |  | |  |
| Items to be included: | | **Repayment:** | | **Employee to be paid if applicable**: |
|  | | Housing Allowance (if applicable) – | |  |
|  | |  | | End of Service Benefit- |
|  | | Annual Leave taken in advance - | | Annual Leave Balance – |
|  | |  | |  |
|  | | Processing costs if leaving company prior to completing probation (including mobile handset allowance) | |  |
|  | | Other: | |  |
| **Petty Cash**  **YES** | | **If yes, returned and reconciled**  **YES** | | **Initials/date:** |
|  |  |  |  |  |
| **NO** | | **NO** | | **Comment** |
|  |  |  |  |  |
| **All liabilities cleared:**  **YES** | | **Initials/date**  **Finance Department** | | **Comment** |
|  |  |  | |  |
| **NO** | |  | |  |
|  |  |  | |  |
| **Notify Finance that final payment to be actioned and bank is to be advised that it is a final payment** | | | | **Initials/Date**  **HR Department** |

**National Ambulance administrative action completed:** **Final payment agreed:**

………………………………………………………………… Employee Signature:………………………………………

HR & Corporate Services Manager

Date: ………………………………. Date: ……………………………