

## HR CHECKLIST

Employee Name :- _____			Employee Code :-		Date of Joining :-	
Department :- _____			Designation :-			
Official HR Documents	Due Date	Issue Date	HR Generalist	Assistant HR Manager (Verified)	Business Operations Head (Final Verified)	All Done (BOH)
Offer Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Background Verification Done		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Appointment Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Confirmation Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
PIP / Performance Notice		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
INCREMENT LETTERS						
1st Increment Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
2nd Increment Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
3rd Increment Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
PROMOTION LETTER						
1st Promotion Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
2nd Promotion Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
3rd Promotion Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
EXIT PROCESS						
All Company Assets recovered?		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Exit Document Processed		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Relieving Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Experience Letter		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
FULL AND FINAL SETTLEMENT-SECTION						
Full and Final Settlement - 1		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Full and Final Settlement - 2		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Full and Final Settlement - 3		Date :-				Yes <input type="checkbox"/> No <input type="checkbox"/>
		Sign :-				
Final Closure Remarks (HR) : _____					Last Working Date :-	