**Date:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Type of Separation: Resignation Termination Others

|  |  |
| --- | --- |
| Name: | Designation: |
| Employee No: | Department: |
| Last Working Day: | No. of days present during the month: |

|  |  |
| --- | --- |
| **IT/ NY Office/ Peter** | |
| 1. Disabled E365 Account *[Within 24hrs]* |  |
| 1. Others *[Within 24hrs]* |  |
| Employee Signature: - IT Manager Signature:- | |

|  |  |  |
| --- | --- | --- |
| Admin & HR | | |
| 1. Employee Card | Yes | |
| 1. Office Keys/ Locker Keys/Access Card | Yes | |
| 1. Office Assests 2. Office Keys/ Locker Keys 3. Mobile Devices 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 7. Workstation [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] 8. Laptop [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] 9. Others. | Assigned | Returned |
|  |  |
| Employee Signature: - Manager HR/ Admin Signature:- | | |
| **Department Manager** | | |
| 1. Co. Files/ Registers/ Manual/ Equipment’s |  | |
| 1. Debriefing and written hand over note |  | |
| 1. Work related Passwords in Excel |  | |
| 1. Source Code, if applicable |  | |
| Employee Signature: - Department Manager Signature:- | | |
| **Finance & Accounts** | | |
| 1. Loan/ Advance settlement |  | |
| 1. Any other Liabilities |  | |
| Employee Signature: - Finance Manager Signature: - | | |
| **IT** | | |
| 1. Computer & Peripherals |  | |
| 1. E-mails & Systems Passwords, if applicable |  | |
| Employee Signature: - IT Manager Signature:- | | |

**Employee Signature:**  **Last Date:**

|  |  |
| --- | --- |
|  |  |

**\* Signed duly by Employee, copy submitted to HR for F&F settlement.**

We hereby confirm that we do not have any objections to clearance of dues of Mr./Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ we also confirm that all property of the Company entrusted to his/her during the tenure of service has been recovered and there is nothing against the individual as on date.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Authorized Signatory) (Date)**

|  |  |
| --- | --- |
| **Partner or General Manager Signature: -** |  |