

## LEAVING THE UNIVERSITY CHECKLIST

This form is to be used when a staff member is leaving their employment with the University to ensure any necessary tasks are completed prior to or on the staff member's last day of employment.

| STAFF MEMBER DETAILS   |   |      |   |      |  |  |  |  |  |
|--|---|------|---|------|--|--|--|--|--|
| Staff ID:Position Title:   |   |      |   |      |  |  |  |  |  |
| School/Branch: Work phone:   |   |      |   |      |  |  |  |  |  |
|  |   |      |   |      |  |  |  |  |  |
| Title:Family Name:Given names (in full):  Last day of employment (end date after any leave which is taken prior to leaving): |   |      |   |      |  |  |  |  |  |
| CHECKLIST DETAILS  |   |      |   |      |  |  |  |  |  |
| No   | Actions   | Υ    | N | N/A  |  |  |  |  |  |
| 1  | I have completed the Resignation Advice Form specifying my last day of employment                     |      |   | IN/A |  |  |  |  |  |
| 2  |   |      |   |      |  |  |  |  |  |
|  | I have applied via SSO for any leave I am intending to take prior to my resignation/retirement        |      |   |      |  |  |  |  |  |
| 3  | I have returned all University property including:  ☐ Laptop other electronic devices ☐ Motor vehicle |      |   |      |  |  |  |  |  |
|  | · · ·   |      |   |      |  |  |  |  |  |
|  | <ul><li>□ Car park permit</li><li>□ Building access/staff ID card</li><li>□ Library Books</li></ul>   |      |   |      |  |  |  |  |  |
|  | ☐ Credit Cards ☐ Research documents etc   |      |   |      |  |  |  |  |  |
|  |   |      |   |      |  |  |  |  |  |
|  | ☐ Other (if required)   |      |   |      |  |  |  |  |  |
|  |   | Υ    | N | N/A  |  |  |  |  |  |
| 4  | I have made arrangements with Custom Fleet in relation to my novated vehicle lease                    |      |   |      |  |  |  |  |  |
| 5  | I have attended to the following:   |      |   |      |  |  |  |  |  |
|  | ☐ Cancelled Mobile and Data Plans   |      |   |      |  |  |  |  |  |
|  | ☐ Hard copy papers/documents filed in Content Manager record file                                     |      |   |      |  |  |  |  |  |
|  | ☐ Electronic files are in appropriate University Drive/s  |      |   |      |  |  |  |  |  |
|  | ☐ Email (inbox, other personal folders) cleared   |      |   |      |  |  |  |  |  |
|  | ☐ Voicemail message cancelled   |      |   |      |  |  |  |  |  |
|  | ☐ Removing any University data from all personal devices  |      |   |      |  |  |  |  |  |
|  | ☐ Handover of ongoing/current tasks with my supervisor  |      |   |      |  |  |  |  |  |
|  | ☐ Change ownership of any Shared Mailbox, Folders or Box Drives                                       |      |   |      |  |  |  |  |  |
|  | ☐ Remove details from <u>UoA Phone Directory</u>  |      |   |      |  |  |  |  |  |
|  |   |      |   |      |  |  |  |  |  |
|  | ase call Corporate Information Services on 35334 if you need assistance.                              |      |   |      |  |  |  |  |  |
| 6  | Academic Teaching Staff   | Υ    | N | N/A  |  |  |  |  |  |
|  | I have made arrangements to inform all my students (where appropriate) that I am leaving the          |      |   |      |  |  |  |  |  |
|  | University.   |      |   |      |  |  |  |  |  |
| 7  | Professional Staff  | Υ    | N | N/A  |  |  |  |  |  |
|  | I have made arrangements to either take or claim untaken Time off in Lieu of Overtime (TOIL)          |      |   |      |  |  |  |  |  |
|  | which has been approved by my supervisor in accordance with Clause 3.6 of the Enterprise              |      |   |      |  |  |  |  |  |
|  | Agreement and which I was unable to take during employment.   |      |   |      |  |  |  |  |  |
| STAFF MEMBER (For signature)   |   |      |   |      |  |  |  |  |  |
| I certify that all details above are correct and all University property has been returned to my supervisor.                 |   |      |   |      |  |  |  |  |  |
|  |   |      |   |      |  |  |  |  |  |
| Signature:Date:  |   |      |   |      |  |  |  |  |  |
| SUPERVISOR (For signature)   |   |      |   |      |  |  |  |  |  |
| Suna   | visor's Name Signature: D   | ato: |   |      |  |  |  |  |  |
| Supervisor's NameSignature:Date:   |   |      |   |      |  |  |  |  |  |

Completed checklist should be retained in the local area

| Workforce Management Handbook | Leaving the University Checklist | Effective Date: | 31/08/2023 | Version 3.0 |
|-------------------------------|----------------------------------|-----------------|------------|-------------|
| Authorised by                 | Director, HR Shared Services     | Review Date:    | 30/08/2026 | Page 1 of 1 |