## EMPLOYEE END OF EMPLOYMENT CHECKLIST

Name:		
Positio	n:	
My em	ployment with Uintah School District will :	be discontinued for the following
1.	Other employment	
2.	Spouse transferred	
3. 4.	Contract ended Other (Explain)	
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Forwar	rding address for W-2 purposes:	
<u>Buildir</u>	ng Administrator, (Initial and Date)	
	Return Keys	
	Return ID Badge	
	Fixed Assets Accounted For	
	Letter of Resignation	
	Enter last date of employment	
	Final Time Sheet	
	Return Purchasing Card	
	School Foods Balance Paid	
	Credit Card and Receipts	
	Legislative Supply Fund Receipts Su	bmitted to Principal or School Secretary
	Employee Signature	Date
	Administrator Signature	Date