

SEPARATION CHECKLIST All Employees (Salaried, OPS and Courtesy)

Employee's Last Name, First, Middle Initial				Employee ID and Record Number	Termination Effective Date (Day after last day worked)
Position Title Department			Department	Department Representative	Phone Number
	A	&P/L	SPS Faculty (Salary)	OPS/Courtesy (maintain in department file	(3)
				Department do not complete this form	. Refer to the "Employee
			<u>t" on the HR Website for employee to</u> REPRESENTATIVE RESPONSIBILI	-	
				plete Personnel Action Form (ePAF/pPA	AF)
contact po	ersons Rece	s wh ivab	ere debt exists and attach it to this for	pleted. As you progress through the item m. After discussing with the employee at on the final paycheck(s). Signature of the indicate this on the signature line.	ny debt owed to FSU, notify
Initial [Date				
		1.	NWRDC, which may be used by	les have been removed. nove any other system access (i.e. syste the department but not by the whole uni es not remove Instructor/TA/course desig	versity).
		2.	determine if the separating employee Salary/Budget Preparer or Dean/Dire	Run the FSU_CF_DEPT_ALL_DESIGNA e is a Budget Manager/Concur Approver ector/Department Head/Chair (see <u>Contro</u> omplete the Budget Office form, <u>Update I</u>	, Authorized Signer, Hyperion oller's Office website for
		3.		Management Department (<u>Lib-FinesMan</u> rs, etc.). Include the separating employed	
		4.		rned to Key Bank (644-9612 or <u>keyshop</u> A) or to Departmental Representative.	@fsu.edu) at 150 MMA
		5.	OMNI timesheets (as appropriate) ha	P and FACULTY - pay and leave reports ave been audited by the time/leave coord employment and final leave accruals have	dinator or the supervisor. Audit
		6.		e in Guardian with the effective date of sorto terminate the paper I-9. Additional	
		7.		gate openers must be returned to FSU T in a \$30 fine for the remote or \$15 fine fo	
		8.	FSU_DEPT_MNGR_REP_BY_DEPT	ager and Representative – Run OMNI Γ (HR) to determine if the separating em a <u>HR Department Table Update</u> form to υ	ployee is a Department

	DEPARTMENT REPRESENTATIVE RESPONSIBILITIES (cont'd):					
initiai	nitial Date					
		9.	OUTSTANDING DEBTS			
			 a. Petty Cash Funds - Run the FSU_DPT_AP_OPEN_ITEM_BAL (FI) query to check for any outstanding petty cash advances. If an outstanding debt exists, contact Disbursement Services (<u>AccountsPayable@fsu.edu</u>) for processing details. 			
			b. Auxiliary AR – Run the FSU_AUX_EMPLOYEE_DEBT (FI) query to check for any outstanding auxiliary debts. If an outstanding debt exists, contact Auxiliary Accounting (ctl_auxiliaryaccounting@fsu.edu).			
			 Salary Overpayments - Contact Payroll Services by submitting a case via the FSU service center or emailing <u>payroll@fsu.edu</u> to verify employee repayment options. 			
			d. <i>Miscellaneous Debts</i> - Contact Student Financial Services (644-4257 or ctl-accountsreceivable@fsu.edu) to identify any outstanding debts.			
			e. Employee FSU Payroll Deductions - Contact Payroll Services by submitting a case via the FSU Service Center or emailing payroll@fsu.edu to verify if employee has an outstanding balance for FSU Foundation Loans or FSU Employee Accounts Receivables.			
		10.	PROPERTY			
			 Verify any short-term loans of laptops or other equipment have been returned to the department through your Departmental Inventory Custodian. 			
			b. Verify if there are any capital assets that may be "offsite" and assigned to the separating employee. Run the following query; FSU_DPT_AM_OFFSITE_ASSETS (FI). If the separating employee has FSU equipment with a cost of \$5,000 or greater checked out, please reach out to the employee to return the item. Please populate the bottom portion of the Off-Site Equipment Form and send it to the Asset Management Office when the equipment has been returned.			
			c. Verify if the separating employee is an Inventory Taker, Custodian or Manager. Run the following query for your department, using the first three digits of your department number. FSU_DPT_AM_PROPERTY_ROLES (FI). Notify Asset Management via a completed Property Role Form if roles should be updated.			
		11.	PURCHASING CARD (P-Card)			
			 a. Cardholders - Email <u>pcard@fsu.edu</u> and ask for the P-Card Administrator to verify the card has been returned by the cardholder. 			
			 b. Proxies - Submit the Proxy Termination/Transfer Request form through <u>SpearMart</u>. The FSU_DPT_PCARD_PROXYUSERS (FI) query can be run to determine the proxies in your department. 			
		12.	. TRAVEL			
			 a. T-Card - Supervisor is to complete the <u>Travel Card Cancellation Request</u> and return it to the T-Card Administrator (<u>travelcard@fsu.edu</u>) immediately upon notice of employee's termination; destroy the employee's T-Card; and employee is to submit expense report(s) for all available T-Card charges. b. Travel Advances/Non-Travel Expense Reports/T-Card charges/Travel Requests - Contact travel (<u>travel@fsu.edu</u>) to determine if any outstanding/pending Travel Cash Advances, expense reports, T-Card charges, or travel requests exist. Travel will provide processing details. 			
		13.	INFORM EMPLOYEE OF EXIT INTERVIEW PROCESS – For USPS and A&P, employees may visit			
			https://hr.fsu.edu/?page=elr/elr_exit_surveys for information regarding the Exit Survey or contact the Office of Human Resources, Employee & Labor Relations (644-6475). For information on Faculty exit surveys, please contact the Office of Faculty Development & Advancement (644-6876).			
		14.	SWIPE CARD ACCESS – Swipe card access should be disabled upon termination. Please have your department's Authorized Security Representative submit a CRM service ticket requesting the removal of departmental card access from the employee's personnel record.			
		15.	. SPONSORED RESEARCH – If a PI or Co-PI on a Sponsored Project, sponsored research activity has been verified with at Sponsored Research Services (<u>SRA-pre@fsu.edu</u>)			
		16	. GRADUATE SCHOOL – Does the employee (Faculty or Staff) have any access to systems managed by the Graduate School or on a student committee (e.g. GST, GFS, Slate, Waivers, Manuscript Clearance			
			Portal)? YES NO If yes to any, the Graduate School has been notified of the separation. Contact: Ashley Jarvis (a.jarvis@fsu.edu).			

Employee's Last Nar	me, I	First, Middle Initial		Employee ID	and Record Number	Termination Effective Date
USPS/A&P/FAC	UL rty a	and debt owed to I				countable for all assigned collection procedures will be
Please respond t	to it	ems 17-26, initial	and date lines as co	mpleted or indicate N	I/A if not applicable.	
		regarding propert graduate tuition w a. Library – Retu b. Parking – Return to return will r c. Keys – Return	y, travel related item raivers), etc. urn all books, materiaturn gate cards and result in a \$30 fine for all building and/or or	s, keys, library fines, als, and library carrel remote gate openers or the remote or \$15 f office keys to the dep	parking, taxes owed keys to the approprion to FSU Transportation for the gate card partment representation.	
		must complete a	Form 1F within sixty		public office or empl	loyment. Download the current
		for information reg the Office of Hum	garding the Exit Surv an Resources, Empl	ey. If you have any o	questions regarding ons (644-6475). For	edu/?page=elr/elr_exit_surveys the survey, please contact Faculty exit surveys, please
:	20.	canceling insuran	ce, reimbursement,		ınts. State insurance	es the process for continuing or benefits may continue rame.
:	21.					at UCA1400 (MC: 2370) o weeks prior to separation.
:	22.			m of two weeks prior eport for all available		n T-Card to your supervisor for
:	23.		SU_DPT_AM_PROF			to the Departmental Inventory ermine who holds this
· :	25.	equipment, resea	rch materials, and sa	amples for disposal ir	n accordance with th	ry space have assessed all ne <u>FSU Safety Manual</u> . Health & Safety Officer.
;		address along wit forms related to a	h any changes to yo nnual federal W-2 fo	our mailing address a orms, insurance/retire	nd telephone number ment information, a	e valid, personal email er to ensure all notices and and leave payments are ated information below:
Street or P.O. Bo	ΟX		C	City	State	Zip
Phone (including	are	ea code)	Email			
:	27.					Consenting to Electronic W-2 greement, no action is
;	28.	-	Retiring employees c	an maintain access t	o their University em	nail.
				maintaining access to		ail and it will be disabled.

III. IMPORTANT EMPLOYEE INFORMATION: Please review the following and note relevant information.

TAX SHELTERING: A portion of the annual and/or sick leave payments may be tax deferred. Employees must notify the Office of Human Resources-Benefits (retirement@fsu.edu) within 10 business days following the date of separation. Failure to notify benefits, establish a 403(b) account, set up a salary deferral, or work with the Bureau of Deferred Comp, within 10 business days, will result in your leave payout being paid to you as a direct deposit minus applicable taxes.

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	YES, I plan to tax shelter my leave payout to <u>FSU's voluntary 403(b) plan</u> . The Leave Payout 403(b) Deferral Authorization (pg. 5) must be emailed to <u>retirement@fsu.edu</u> within 10 days of separation.					
	YES, I plan to tax shelter my leave payout to a 457 with the Florida Deferred Compensation Plan. The Leave Payout 403(b) Deferral Authorization (pg.5) must be emailed to retirement@fsu.edu and the Deferral from Special Supplemental Pay form and Participant Action Form must be submitted to defcompleavepayout@myfloridacfo.com within 10 days of my separation date.					
	NO, I am not interested in tax sheltering	g and request payment of my accrued leave	(if applicable).			
Maximum lifetin Employees mu leave balance. employee's tota 2011, shall not fund transfer/di	st have completed a minimum of 10 full y The maximum amount of sick leave hour al sick leave hours, up to 1,920, which eq		ent of a portion of their sick ent is one-fourth of the nt. Faculty hired after May 6,			
		ify with the receiving agency that they will what documents are required to transfer ins				
Are you tra	insferring your annual leave to another S	tate agency or university? YES	NO			
Are you tra	insferring your sick leave to another State	e agency or university? YES	NO			
If YES:	Name of agency or university					
	Number of hours to be transferred: Ann	nual Sick				
		nay donate up to 40 hours of sick leave to thom your sick leave balance prior to the calcu				
	vish to donate to the SLP? YES	NO If Yes, number of hours				
	ailed effective the date of separation. Em	ard as long as it has a monetary balance. Ho ployees retiring from FSU may contact the F				
		ON: If your pay statement shows deduction riate source to make arrangements for paym				
EMAIL: Per 4-0 Microsoft 365 a		d employees will generally lose access to Ur	niversity email and other			
June 1st of the		our OMNI USERID and password as you will access will allow you to (1) update your addage Statement.				
employment wi	ith a private business entity in connection n two years of retiring or separating. Que	a Statutes, separating employees are prohib with any state contract in which they had restions regarding this requirement may be re	sponsibility while an			
Pending chec	klist items may further delay the separ	paid any earlier than two pay periods foll ration payout. ND HAVE FULFILLED MY OBLIGATIONS				
Employee's Si	gnature	Date				
Supervisor's S	signature	 Date				



Tallahassee, FL 32306-2410 Phone: (850) 645-2303 Fax: (850) 645-9509

Leave Payout 403(b) Deferral Authorization

[Note: For deferrals to a 457 Deferred Compensation account, please complete paperwork linked in Section C]

A.	Employee Information	:						
	Name (Last, First)				OMNI ID#			
	Email Address				Daytime Phone Number			
В.	Leave being deferred:							
	Annual Leave payo	ut Sick Leave pay	yout	Compensatory Leave	Payout			
c.	Indicate the type of ac	Indicate the type of account:						
	403(b) Tax-Sheltere	ed Annuity (Pre-tax)	Roth 4	03(b) (Post-tax)	*457 Florida Deferred Compensation			
	*To defer leave payouts to a 457 account, you must complete the Deferrals From Special Supplemental Pay forms and submit the documents to Deferred Compensation at defcompleavepay@myfloridacfo.com.							
D.	Indicate the amount you want to defer next the applicable vendor(s): (*Indicate "Max" to defer entire payout up to the IRS annual limit.)							
	Vendor	Amount (specify \$	or %)					
	TIAA							
	Corebridge Financial							
	Voya Financial							
E.	Additional Action: Enroll and/or confirm active salary deferral in Retirement@Work Submit the required account contract(s) for the selected vendor(s)							
F.	. Acknowledgement, authorization and signature:							
	Existing Salary Deferral and Vendor Contract: Prior to completing this agreement, I have enrolled in a 403(b) Tax-Sheltered Annuity and/or Roth 403(b) salary deferral, with the vendor(s) selected above, through the Retirement@Work portal, and I have submitted the required account contract(s) for the selected vendor(s). I understand that failure to enroll in active salary deferrals and/or complete the vendor contract(s) prior to my leave payout being processed will result in my payout being issued through electronic fund transfer/direct deposit. IRS Contribution Limits: The 402(g) annual limit includes elective deferrals to 403(b) plans, including Roth, Tax-Deferred and the SUSORP, 401(k) plans and the federal government's Thrift Savings Plan, including contributions to other employer plans. Deferral Authorization: This Leave Payout 403(b) Deferral Authorization form must be signed in order to be processed. By signing this form, I understand that this agreement is legally binding and irrevocable with respect to amounts earned while it is in effect. In addition, I am responsible for the accuracy of the deferred amounts stated in this authorization; for any overstatement of the amounts excludable as a leave payout deferral in this agreement; or any other violation of the requirements of Sections 403(b), 402(g) and/or 415, IRC; and for any additional taxes, interest and penalties that may be assessed.							
	Employee Signature				Date			

^{**} Submit completed form to the HR Retirement office, via fax to (850) 645-9509, or email: retirement@fsu.edu **