



## COLLEGE OF MICRONESIA-FSM

### EMPLOYEE CHECK-OUT FORM

Name: \_\_\_\_\_ FSM SS#: \_\_\_\_\_

Termination Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

EMPLOYEE: Submit this form to the persons responsible for the activities listed below. Your final paycheck will be withheld until this form is properly completed and all obligations to the College cleared.

ACTIVITY HEAD: indicate whether the employee is free of any obligation in your areas. If not, please specify.

ACTIVITY	STATUS	SIGNATURE
1. Library: 1. Overdue fines 2. Books		
2. Audio-visual: 1. Equipment		
3. Admissions & Records [Instructors] 1. Student Grades		
4. Business Office: 1. Tuition 2. Travel Voucher 3. Purchase orders 4. Petty Cash voucher		
5. Bookstore: 1. Employee Personal Account		
6. Supervisor: 1. Office keys 2. Computer/iPad 3. Projector 4. Textbooks/Grade books 5. Grades 6. Car keys 7. Performance evaluation 8. Reports		
7. Information Technology 1. Technology devices		
8. Entry Permits – return to HR		

EMPLOYEE: If you are leaving the island, please clear your obligations with the following prior to departure.

COMPANY REP: This is just a reminder to the employee to clear his/her obligations with local business prior to his/her departure. The College is not responsible for any obligations incurred by the employee, unless the employee instructs the College in writing to deduct it from his/her paycheck.

<b>COMPANY</b>	<b>STATUS</b>	<b>SIGNATURE</b>
Landlord		
Utility		
Telecommunications		
Island Cable		

I authorize the College to deduct outstanding obligations to the College from my final paycheck.

Signature: \_\_\_\_\_

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



6. List names of committees you have served with during your employment.

7. What do you feel is your most important contribution[s] to the college?

8. When you had problems, how did you deal with them?

9. Do you have any suggestions for ways we can improve COM-FSM?

Signature: \_\_\_\_\_

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