

WALLA WALLA COMMUNITY COLLEGE

Employee Separation Notification Form

Directions: Please fill out this form in addition to your resignation letter. This information will assist HR in providing you with appropriate information upon your transition.

EMPLOYEE NAME:	PERSONAL EMAIL:
POSTION TITLE:	EMPLOYEE ID#:
DEPARTMENT:	SUPERVISOR:
*Last Day of Employment:	Last physical day in the Office (if different):
REASON FOR SEPARATION:	
☐ Retirement - I would like to meet with HR ☐ Voluntary Resignation ☐ End of Contract/Assignment ☐ Other: I will be working at another WA State agency:	to review my retirement options.
I WOULD LIKE INFORMATION ON:	
Health Benefits □Yes □No □N/A	 □ I have updated my personal information in WarriorLink in order to continue to receive future communications regarding W-2, payroll, etc. □ Forwarding address
VEBA □Yes □No □N/A	☐ Personal email address
Leave Transfer/Cash Out	HR will contact you regarding an exit interview.
□Yes □No □N/A	Additional comments or questions:
Other:	
□Yes □No □N/A	
Signature:	Date:
HR Use Only: Employee has been provided the following informati ☐ PEBB Form ☐ Leave Cash Out ☐ Other ☐ Exit interview scheduled ☐ Retirement N	r:
Action completed: ☐ HR Off-Boarding Form ☐ HR Notification sent ☐ Benefits Terminated ☐ If Supervisor, complete the "Supervisor Change Procedures"	

8/3/2022 Form # - TBD