Vanderbilt University School of Medicine FACULTY Departure Checklist

This checklist should be completed by each faculty prior to his/her last day with the Department. Because of the time required to complete this form, it should be given to the terminating faculty member 30 days prior to termination. The faculty member and his/her Division Administrator are responsible for ensuring that all checklist items are completed and that the form is turned in to the Department Administration prior to the faculty member's last day of employment.

FOR COMPLETION BY TERMINATING FACULTY MEMBER

are insurance and other benefits such as retirement? fyou do not wish to extend your healthcare insurance, have you returned your dentification card to the HR Benefits Office or your department administrator? fyou are an international visa holder, have you coordinated your transfer, discharge, or yes my asignation through the Human Resource Office of International Services? lave you returned your Vanderbilt University/Medical Center: Deard De	Human Resources		
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Vanderbilt University School of Medicine Department Checklist for Departing Faculty

FOR COMPLETION BY DIVISION/DEPARTMENT ADMINISTRAT	<mark>'OR</mark>	
• Have you sent written notice of the faculty member's termination to the Office of Faculty Affairs?	□ Yes	□ N/A
 If clinical faculty, have you given a 45-day notice to terminate liability coverage to department administrator? 	□ Yes	□ N/A
• If clinical faculty, have you notified the Physician Billing Systems of the last working day for the faculty member?	□ Yes	□ N/A
 Have you notified Telecommunications to void: D V-Net number D Telephone calling card? 	□ Yes	□ N/A
Have you notified the Department Administrator to void all computer access privileges?	□ Yes	□ N/A
Have you notified the Computer Network Manager to cancel email access or confirm length of continuation following termination?	□ Yes	□ N/A
 Have you notified Department Administrator to delete: people finder listing email listing organizational chart entry procurement card authorizations any signature authorities any website listings mail distribution address 	□ Yes	□ N/A
 Have you made arrangements with the faculty member regarding final paycheck and benefits? 	□ Yes	□ N/A
• Has final PAF been submitted and documentation submitted that all expenses related to the departing faculty member have been met?	□ Yes	□ N/A
• Have you received a signed copy of the faculty departure checklist?	□ Yes	□ N/A
Signature/Date:		
Department/Division Manager		
Department/Division Network Manager		
Department Chair/Division Head/ Department Administrator		