



### Carbondale Campus End User Instructions

#### FORM –Faculty, Administrative/Professional and Civil Service Staff Resignation/Separation

**Use:** To end an individual's employment with the university and remove his/her name from the university payroll.

**Access:** Obtain necessary form(s). Electronic forms are available through the eforms website *eforms* (<http://eforms.siu.edu/siuforms/info/hro1050.html>)

**Instructions:** Complete the form using the following instructions. Unless noted, all fields are **REQUIRED**.

- Name* Last, first and middle name of the appointee.
- Employee ID* The appointee's employee ID.
- Preparer's Mailcode* Mailcode of the individual preparing the form.
- Forwarding Address* Address where any mail received by the University following date of separation may be forwarded, including street, city, state, country and zip.
- Position ID* The unique AIS HRMS identifier for the position(s) held by the individual.
- Rank, Title or Classification (Job)* Faculty rank, administrative title or civil service classification of the position(s) held by the individual.
- Department (Organization)* Name of the department(s) where the individual has been employed.
- Reason (Voluntary)* Mark appropriate reason the individual is voluntarily leaving employment with the University.
  - Resignation
  - Resigning civil service appointment to accept faculty or administrative/professional staff position
  - New appointment declined
  - Retirement



# Faculty, Administrative/Professional and Civil Service Staff Resignation/Separation Form

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*Effective Date* Ending date of the individual's employment for a voluntary reason.  
(Date format DD Mmm YYYY)

*Signature of Staff Member* Signature of the individual separating from the University and date signed. (Date format DD Mmm YYYY) Employee signature is required for any voluntary reason for leaving.

*Reason (Other)—signature optional* Other reason, if none of the voluntary reasons apply.

- Layoff
- Death
- Dismissal
- Discharge
- Termination
- Appointment not renewed.

*Effective Date* Ending date of the individual's employment for any other reason.  
(Date format DD Mmm YYYY)

## Administrative Approvals Section:

*Chair/Fiscal Officer* Signature of Chair/Fiscal Officer and date signed.

*Dean/Director* Signature of Dean/Director and date signed.

*Vice Chancellor/Provost* Signature of Vice Chancellor/Provost and date signed.

*Other Administrative Approval* Signature of any other administrator whose approval is required and date signed.

*Chancellor* Signature of Chancellor and date signed.

*President* Signature of President and date signed.

**Special Notes:** A *Faculty, Administrative/Professional and Civil Service Staff Resignation/Separation form* must be submitted whenever a member of the faculty or staff leaves university employment for any of the reasons listed on the form. This includes when a term appointee leaves at the end of the term of his or her appointment and will not be re-appointed. The resignation/separation form may be submitted any time in advance of the employee's last day in order to release funding commitments for the position.



## Faculty, Administrative/Professional and Civil Service Staff Resignation/Separation Form

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The employee's signature is required before a *Resignation/Separation* form can be processed for any voluntary separation. A letter written and signed by the separating employee may be attached to the *Faculty, Administrative/Professional and Civil Service Staff Resignation/Separation* form, in lieu of the employee's signature on the form.

Total balances for final pay, accrued vacation, and sick leave will be recorded on a separate form, *Calculation of Final Pay and Fringe Benefits Balances*. A *Calculation of Final Pay and Fringe Benefits Balances* will be completed for all separations. Upon receipt of the *Faculty, Administrative/Professional and Civil Service Staff Resignation/Separation* form or upon notification by the department, Human Resources will complete the calculation form. The form will be completed close to the date of the employee's separation and a copy will be sent to the employing department and to the employee.

Signature requirements vary from responsibility area to responsibility area. Consult with your responsibility area head to determine signature requirements.

The initiating office should maintain a copy of the form for departmental records. After all signatures have been obtained, Human Resources will forward a copy of the form to separating employee and a copy to the Vice Chancellor for further distribution.

**Routing:**

Print this form, acquire the appropriate signatures, and mail it to:  
Human Resources, MC 6520.