

Cessation of Staff Appointment Form

- For all cessations including retirements: send this form to Human Resources Department, 309 Administration Building
 - For full time academics: please also send a copy to the Provost and VP Academic, 208 Administration Building
- For deaths: send this form to Staff Benefits Office, 137 Education Building
- If you have questions on how to complete this form, please call HR Service Centre hris@umanitoba.ca at 474-7930.

A. Employee Information		
1. Surname	2. Given Name(s)	3. Employee Number
B. Position Information		
1. Position Number(s)	2. Job Title in VIP	
3. Faculty/Unit	4. Department	
C. Cessation Information		
1. Reason		
2. Last day of employment		(yyyy/mm/dd)
D. Vacation/Overtime Reconciliation (for support staff only)		
1. Please check the employee's VIP entitlement bank and verify the following is accurate (if applicable)		
a. Vacation	Yes No	b. Overtime Bank Yes No
		c. Vacation Purchase Plan Yes No
*Please attach correction and additions timesheet, if any of the above answer is 'No'.		
E. Attachment		
Copy of letter of resignation/ retirement		Rush Cheque Requisition, if required
Corrections & Additions Timesheet, as appropriate		Other
Comments		
This form is prepared by		Phone
		Date
F. Signatures		
Department		Date
Faculty/Unit		Date
President's/VP's Office		Date

For HR use only	
Approved by HR Consultant (if applicable)	Date
Name match employee number Checked comments field End 2nd & 3rd posn, & so on with later end date Last date worked on status Leave payment Termination benefits Record of Employment	In lieu of notice Max out premium Mid pay adjustment Expire salary detail override if fixed/level/normalized Termination work sheet BOG date if comp gr 012
Processed by	Date