

Employee Check Out Sheet  
Mountain Grove R-III Schools

**Employee Name:** \_\_\_\_\_

All employees leaving the district for any reason must complete this form. This process is intended to assist the employee and district with a smooth transition. Please complete this form on or before your last day of school. Failure to complete the form may affect final pay, insurance, retirement, and or other benefits. PLEASE COMPLETE THE LIST IN ORDER.

Building Administrator: \_\_\_\_\_  
Signature

Technology Department: \_\_\_\_\_  
Signature

- Email Account
- Hardware Returned

OMTC (Mrs. Bell): \_\_\_\_\_  
Signature

- Shop Fees (If applicable)

Support Services (Mrs. Gasperson): \_\_\_\_\_  
Signature

- Key Return
- Food Account

Accounting (Mrs. Dowden): \_\_\_\_\_  
Signature

- Insurance
- Pending Reimbursements

Payroll (Mrs. Mitchell): \_\_\_\_\_  
Signature

- The Final Stop
- Change of Address
- Final Pay
- Personal/Vacation Days
- Teaching Certificate
- Turn In Check Out Form