

**U.S. DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY**

EMPLOYEE EXIT CLEARANCE FORM

For Employees in the Washington, D.C., Metropolitan Area ONLY

INSTRUCTIONS

Employing offices should prepare the form for each employee in the Washington, D.C., metropolitan area upon resignation, transfer, retirement, or reassignment to another Interior Bureau. Each employee is required to clear with the listed office and return or account for these items issued during his/her employment. Authorized officials receiving returned items, or clearing the employee, will signify the verification in the two columns provided. Employing offices may supplement this clearance process with any additional controls which may be necessary for local accountability. At a minimum, however, OS 112 must be completed for each separating employee. Administrative officers and contacts must assume the responsibility to ensure that the clearance process is timely initiated and completed so that greater controls are placed on accountable items and any indebtedness due to the Federal Government is collected. Contact the Office of the Secretary's Records Management Officer at 208-6637 for questions related to office records and/or documentary materials. To expedite the clearance process, items in Section B 1 through 12 need not be completed in the order listed on the form.

FINAL PERSONNEL ACTION WILL NOT BE TAKEN UNTIL THE CLEARANCE HAS BEEN COMPLETED.

Employee's Name: _____ SSN: _____

Employing Office and Location: _____ Separation Date: _____ Type of Separation: _____

SECTION A: Employing Office must clear or prepare the following items:	Cleared or Prepared by:	Date
1. SF-52, Request for Personnel Action, prepared.		
2. Office records and other documentary materials (paper and electronic)		
3. DI-105, Receipt for Property (Loans, etc.), returned.		
4. Government Transportation Requests (GTR's), returned.		
5. Keys for other than Main Interior and Interior South Buildings, returned. (e.g. desks, filing cabinets, lockers)		
6. Time and Attendance Report, final prepared.		
7. Outstanding Travel Vouchers, submitted		
8. Forwarding address, if changed, provided to Payroll.		
9. DI-1957B, Procurement Official Certification regarding procurements over \$100,000.		
10. Other: (e.g. voice mail password clearance, speed dial codes, telephone calling card, and pagers)		

SECTION B: Employees in the Washington, D.C., Metropolitan Area must clear with the following offices.	Cleared or Prepared by:	Date	
1. Departmental Library Off C St. Lobby-MIB			
2. Departmental Museum Artwork Rm. 2272 (off central hall corridor)			
3. Records Management Office Rm 119 SIB			
4. Parking Permit Office Rm. 1210-MIB			
5. Public Transportation Benefit Program Rm. 1210-MIB			
6. Room keys for the Main Interior and South Buildings Rm. 1229-MIB			
7. Employee and Secretarial I.D. Cards Rm. 1229-MIB			
8. Official Passport and/or Visa Office Rm. 1319-MIB			
9. Financial Management: (a) Outstanding Travel Advances (b) Government Integrated Charge Card Program (c) Outstanding Bills for Collection Rm. 2540-MIB Rm. 1313-MIB			
10. Security Debriefing Rm. 1229-MIB			
11. Telecommunications (eg. telephone calling card, pager, cellular phone, and telephone listing DI-28) Rm. 1540-MIB			
12. ADP and Local Area Network (LAN) Clearance Rm. 1565-MIB			
13. Departmental Ethics Office Rm. 4354-MIB			
SECTION C: Certification of Completion of Employee Exit Clearance Form			
I certify that all government property and permits have been accounted for, and unless otherwise shown, no amount is due the Federal Government from me.		I certify that the employee has completed the exit clearance process.	
Employee's Signature (or Authorized Representative)	Date	Administrative Contact's Signature	Date
SECTION D:			
Servicing Personnel Office (for OS Employees 5241-MIB, for OIG Employees 5339-MIB).	Cleared	Date	

PRIVACY ACT STATEMENT

The authority for requesting information hereon from an employee is as follows: Sections 301, 552a(e), 4108, 5501 et seq., and 5075 of Title 5 of the U.S. Code; and Sections 3301 et seq., 3501 et seq., and 3701 et seq. of title 31 of the U.S. Code. The information will be used to determine if the employee, by virtue of or relative to his or her Federal employment, is indebted to the U.S. Government for money, property, documents, or otherwise or has any obligations to the Federal Government that are required to be resolved before the Federal Government will release the employee's final pay check, retirement, or other amounts due the employee. The Form will serve as a vehicle for debriefing the employee and advising the employee of post-employment restrictions or benefits or rights based on his or her Federal employment. Information on the form may be provided to a federal agency for the purpose of collecting a debt owed the Federal Government through administrative or salary offset. Furnishing the information on the form is voluntary but failure of an employee to complete the form may be grounds to withhold the release of monies otherwise due the employee from the Federal Government.

Records Management Employee & Contractor Clearance Sheet

Name _____

Office _____ Room _____

1. I am employed by an office in the OS (including all component offices of the Secretary's Immediate Office and all offices in PMB), the SOL, the OIG, or in one of the Assistant Secretary's Offices.

 Yes. Proceed to question 2.
 No. **Proceed to question 8.**

2. I have held one of the following positions: Secretary, Deputy Secretary, Assistant Secretary, Solicitor, or Inspector General.

 Yes. Skip to question 5.
 No. Proceed to question 3.

3. I have held one of the following positions: Deputy Assistant Secretary, Office Director, or Staff Assistant to the Secretary, Deputy Secretary, Assistant Secretary, Solicitor, Inspector General, Deputy Assistant Secretary, or Office Director.

 Yes. Skip to question 5.
 No. Proceed to question 4.

4. I am a political appointee.

 Yes. Proceed to question 5.
 No. Proceed to question 5.

5. I have maintained (or had maintained, for me) a paper or electronic calendar (appointment book, schedule, log or similar record).

 Yes. Proceed to question 6
 No. Skip to question 7. .

6. I have printed out (in a legible format) or had printed out for me, all data in my electronic calendar, filed it with my paper calendar records, and notified my office that:

a. ___ these records need to be retained for 5 calendar years following my departure from the position, if I have held any of the following positions: Secretary, Deputy Secretary, Assistant Secretary, Solicitor, or Inspector General, and then transferred to the National Archives and Records Administration for permanent safekeeping, OR

b. ___ these records need to be retained for 3 calendar years, following my departure from the position, if I have held any of the following positions: Deputy Assistant Secretary, Office Director, or Staff Assistant to any of the positions referenced in a. or b., OR

c. ___ these records need to be retained for 2 calendar years, following my departure from my position, if I have held any other position, if they contain substantive information relating to official activities that has not been incorporated into other official files,

as attested to by the signature of my office file manager, at right: _____

___ Yes Proceed to question 7.

___ No. Return to your office to complete this step. Your checkout is not complete until you accomplish it.

7. I have printed out all electronic files in my possession that need to be retained, or had this accomplished for me, and transferred all records in my possession to my supervisor or office file manager, as attested to by the signature of this individual, below:

___ Yes Proceed to question 8.

___ No. Return to your office to complete this step. Your checkout is not complete until you accomplish it.

8. I have transferred my file of weekly "Email Backup Status Notification" messages to my office file manager for indefinite storage in my office's files, as attested to by the signature of my office file manager, at right: _____

___ Yes. Sign and date the checkout form. You are through!

___ No. Return to your office to complete this step. Your checkout is not complete until you accomplish it.

Signature

Date

Attachment 2