Clearance of Personnel for Separation or Transfer

Please see instructions on the reverse of this form.

1. Employee Name	2. Organization	3. Building and Room	4. Release Date

5. Forwarding Address	6. Action
	☐ Reassign to other NIH component ☐ Reassign to other HHS component ☐ Transfer to other Govt. Agency ☐ Termination of Appointment ☐ Resigned ☐ Retired

7. Items to be Completed/Cleared	**Check if Applicable**	**Check Point** *(title or name; building and room)*	**Signature** *(When completed/cleared)*
Update the NIH Enterprise Directory (NED) system	☐		
NIH 829-5, Termination of Visiting Prgm Participation	☐		
NIH 1767-1, CIT Account Authorization	☐		
Process FellowshipTerms. thru Fellowship Payment Sys.	☐		
NIH 2604, Del of Acquisition Authority	☐		
NIH 2604-1, Request for Ordering Official Authority	☐		
PHS 1373, Separation of Commissioned Officer	☐		
PHS 6364, Employee Invention Report	☐		
HHS 476, Record of Home Address	☐		
SF 52, Request for Personnel Action	☐		
Continuing Obligation Form (Procurement)	☐		
Employee Performance Review/Rating	☐		
Outstanding Travel Advance/Voucher	☐		
Official Records	☐		
NIH and NLM Library Material	☐		
NIH Identification Card (PIV Card)	☐		
Office/Building Keys/Cardkeys	☐		
Parking Permits or Hangers	☐		
Transhare Commuter Cards/Fare Media	☐		
Government Issued Passports	☐		
Domestic/International Phone Cards	☐		
Travel Credit Card	☐		
NIH Government Purchase Card	☐		
NIH Self Service Charge Card	☐		
Radiation Badge	☐		
Radioactive Materials and Equipment	☐		
Electronic Records/Files/E-mails	☐		
Metro Fare Cards	☐		
Flexible Workplace Equipment/Phone Lines	☐		
Cellular Telephones/Pagers/Blackberrys	☐		
Accountable Property (all Govt Property)	☐		
Contract Project Officer Authority Rescinded	☐		
Grant Program Coordinator Authority Rescinded	☐		
Computer Systems Access (LANs, e-mail, databases)	☐		
Security Clearance	☐		
Resolution of Indebtedness	☐		
Notice of Post-Employment Ethics Info. (for Sr. Employees)	☐		
Other/Notes: _____	☐		
Other/Notes: _____	☐		
Other/Notes: _____	☐		

8. *I certify that I have no NIH property, records, or correspondence and I do not have any unresolved indebtedness with the Department.* Employee's Signature Date	9. *I certify that I have reviewed this form and that all required clearances have been obtained.* Clearance Official's Signature (Immed. Supervisor or Project Ofcr.) Date

10. Administrative Officer's Signature	Date	11. Concurring Official (optional)	Date

Instructions

- Employees must use this form to obtain proper clearance from their position. Appropriate sections must be completed *before* separating/transferring.
- The employee's Clearance Official (immediate supervisor), in consultation with the Administrative Officer (AO) will mark the appropriate checkpoints.
- All areas indicated as checkpoints must be cleared and signed by each respective organization. The clearance points listed on **this form** must designate an authorized approving official who is authorized to certify that the employee has or has not been released from obligations for items under the control of that office.
- Failure to complete this form could result in the delay of the employee's final pay check and any lump-sum payments.

Specific Instructions

Items 1–6, Employee Information:

Upon notification that the employee is transferring/separating, the Clearance Official (immediate supervisor) notifies the AO who in turn initiates this form, completing items 1–6, and provides the form to the Clearance Official. The employee is responsible for reviewing these items for accuracy.

Item 7, Items to be Cleared:

The Clearance Official coordinates with the AO to note which clearance points are applicable by checking them under "Check if Applicable". The Clearance Official should work with the AO to identify the name and location of appropriate checkpoints within the IC and NIH. All clearance points must be cleared prior to separation or transfer.

The employee is responsible for reviewing these items for accuracy, allowing sufficient time to obtain all required clearances, calling ahead to schedule an appointment at each checkpoint (if necessary), traveling to each checkpoint and acquiring the signature of the appropriate official at the checkpoint.

Items 8–11, Items to be Cleared:

Once the employee has cleared each designated checkpoint and prior to separation on the final day of official duty, the employee must sign and date the form and obtain the final approval signatures from the Clearance Official, AO, and any concurring signatures as required by the IC.

Record Retention:

The IC AO is responsible for retaining the original of this form for one year or for one year after any indebtedness is recovered, whichever occurs later.