

5.8 Resignation or Contract Release

Last Revised: November 2021

Policy: Piedmont Community College's (PCC) Board of Trustees accepts the voluntary resignation of any employee and will release them from their contractual commitment according to the provisions of this policy.

Purpose/Definitions:

Purpose

The purpose of this policy is to outline the process that should be followed when an employee voluntarily resigns or is released from their position.

Definitions

N/A

Approval Authority/Monitoring Authority: Piedmont Community College's Board of Trustees has approval authority for this policy. The Vice President, Administrative Services/CFO has monitoring authority for this policy.

Procedure:

Section 1: Resignation Notification

- 1.1. The Board of Trustees, upon recommendation from the President, may release any employee from his contractual commitment if a written request is made at least two-weeks before the desired termination date.
 - 1.1.1. The written resignation should include the employee's proposed last working day and the employee's reason for leaving.
- 1.2. The resigning employee's supervisor will recommend acceptance of the resignation and forward the notice through the appropriate vice president to the President.
- 1.3. Employees giving less than two weeks' notice should include reason(s) in the letter of resignation.

- 1.3.1. Employees under contract who do not request a proper release are subject to civil proceedings for enforcement of the contract at the discretion of the Board.
- 1.3.2. The President may select an earlier release date upon recommendation of the appropriate vice president.

Section 2: Benefit Continuation

- 2.1. Continuation of health and other soft benefits differs depending on the type of benefit. Employees should contact the Office of Human Resources and Organizational Development for more information.

Section 3: Exiting Procedures

- 3.1. Prior to the last working day of the resigning employee, the employee shall meet with the Office of Human Resources and Organizational Development to discuss such matters as retirement, hospitalization, insurance, and accumulated annual and sick leave.
- 3.2. The Office of Human Resources and Organizational Development will provide the resigning employee with a Personnel Exiting Procedures form (Exhibit 5.8)
 - 3.2.1. The resigning employee will collect signatures from applicable representatives listed on the Personnel Exiting Procedures form, including Immediate Supervisor, Learning Resources Center, Information Technology Services (ITS) Department, Business Office, Key Administrator, and HR/Payroll.
- 3.3. On the employee's last working day, the employee must turn in, to the appropriate personnel, their keys, textbooks, and any other equipment or material belonging to the College.
 - 3.3.1. The depreciated value of any materials not returned to the Learning Commons or ITS will be deducted from the employee's last paycheck.
- 3.4. Supervisors are responsible for assuring that part-time employees have returned all College-owned property (i.e., keys, LRC materials, textbooks, etc.) and terminating computer access rights with ITS.

Legal Citation: N/A

History: Effective October 1975; Revised October 1988, October 2001, October 2002, November 2021—incorporated then deleted PCC Policy 5.9 Release from Contract

Exhibit 5.8: Personnel Exiting Procedures form

Revised 12/2021

PIEDMONT COMMUNITY COLLEGE PERSONNEL EXITING PROCEDURES

Employee Name _____ **Last Date Employed** _____

The Personnel Exiting Procedures form should be processed on the employee's last date of employment. This form will be filed in the employee's personnel file.

CHECK OUT WITH IMMEDIATE SUPERVISOR

- Completed inventory of assigned program/work station equipment used by employee.
- Completed and turned in all attendance rosters and grades. (Faculty only)
- Turned in all textbooks owned by Piedmont Community College. (Faculty only)

Immediate Supervisor Signature _____ **Date** _____

CHECK OUT WITH LEARNING RESOURCES CENTER (Replacement cost for any missing item(s) will be deducted from your last paycheck.)

- Turned in all printed materials checked out by the employee who is listed above.

LRC Representative Signature _____ **Date** _____

CHECK OUT WITH INFORMATION TECHNOLOGY DEPARTMENT LOCATED IN BUILDING G

(Replacement cost for any missing item(s) will be deducted from your last paycheck.)

- Turned in all College-owned computer hardware, AV equipment and software checked out by employee who is listed above.

IT Representative Signature _____ **Date** _____

CHECK OUT WITH BUSINESS OFFICE

- Turned in P-Card ___ Y/N ___ N/A
- Travel Completed/Closed Out ___ Y/N ___ N/A

Business Office Representative Signature _____ **Date** _____

CHECK OUT WITH KEY ADMINISTRATOR

- Turned in all College-owned keys. ___ Y/N ___ N/A

Key Administrator Signature _____ **Date** _____

CHECK OUT WITH ADVANCEMENT & COMMUNICATONS

- Editing privileges reassigned. ___ Y/N ___ N/A

Adv & Comm Representative Signature _____ **Date** _____

CHECK OUT WITH HUMAN RESOURCES/ORGANIZATIONAL DEVELOPMENT

- Email Address:** _____
- Notation of forwarding address**, if different from current address on file with personnel:

 (Street Address) (City) (State) (Zip Code) (Telephone Number)
- Annual/Vacation Leave:** Pay accumulated leave (*not to exceed 240 hours*) _____ Y/N
 Transfer leave _____ Y/N (Where?) _____
- Bonus Leave** (if applicable): Pay ___ Y/N Transfer leave _____ Y/N (Where?) _____
- Sick Leave:** Use toward retirement _____ Y/N Transfer leave _____ Y/N (Include copy of LEVS screen)
- Retirement:** Retire _____ Y/N Discuss information (*transfer, withdrawal, etc.*) _____ Y/N (Include copy of ORBIT information)
- Major Medical Insurance:** Discuss information about continuation, End Date: _____ (include copy of SHP Confirm statement)
- AFLAC/Colonial** Discuss information about continuation. End Date: _____
- Dental/Vision:** Discuss information about continuation. End Date: _____
- Final Payroll:** Date of last paycheck _____
- IT Notification:** Send form to delete IT access rights (computer and email) _____ Y/N; Date _____
- Website Master Notification:** Send email to delete website access _____ Y/N; Date _____
- ID Badge** returned _____ Y/N If no, Why? _____
- COBRA**-if already enrolled-wish to continue: Dental _____ Y/N Vision _____ Y/N (letter to follow)
- Exit Interview Completed** ___ Y/N

 Employee Signature Date

 Director, HR/OD Date

 Vice President Date

 President Date