


ACCOUNTABILITIES	AMOUNT REIMBURSEMENT / (DEDUCTIONS)	REMARKS	CLEARING OFFICER (PRINT NAME & SIGNATURE)	DATE
FIXED ASSET MANAGEMENT (WED 8AM – 12NN)				
• Laptop & Accessories				
• Others:				
PAYROLL (WED 8AM – 12NN)				
• SSS Maternity Benefit				
• SSS Sickness Benefit				
• Others:				
HUMAN RESOURCES (MWF 1PM – 6PM)				
• HMO IDs				
• Exit Interview				
• Employee Guidebook				
• Others:				

If after my separation, I still have outstanding balance from the government institutions (SSS and HDMF), I will no longer hold CONDUENT (Philippines) liable for my loans and I will personally be accountable for the settlement of my loans.

I hereby certify that all information provided in this clearance form is true and correct. I understand that misrepresentations or omissions will constitute sufficient grounds for the delay of process of or for HR and Payroll not to process my last pay.

Employee Signature:  Date Signed: 05-17-19

Approved for processing:
Employee Relations Officer: _____ Date Signed: _____

Handwritten notes:
4/20/19
K. COO
- Gracey
- Associate

Final Pay can be claimed only during:
Mondays (12:00 NN to 02:00 PM) except if it falls on a holiday.

Contact Details:
E: DL-Philippine.Payroll.Team@conduent.com

Requirements:
Two photocopies of two valid IDs (government issued IDs only)

Reminder: Final pay check will be available on or before the 60th day upon receipt of payroll of your fully signed exit clearance from HR.

- If any event, you won't be able to claim your final pay personally, please prepare a **Special Power of Attorney** and photocopies of two valid IDs of the authorized receiver of the check and the recipient.
- Release of ITR and COE will be on the same date.



CLEARANCE PROCESSING GUIDELINES:

1. Please route your clearance personally to all concerned groups in the form. Incomplete forms will not be processed by HR and Payroll.
2. Attach the resignation letter in this form and fill out the above information before routing the clearance.
3. Only the authorized supervisor or the manager of the department can sign the clearance form. Each supervisor/manager authorized to receive each item listed below must sign in the space provided.

Employee Name: MALABAGO, JEAN CHRISTINE D.
 WIN ID: 52108040 SBU / Department: VZW
 Designation: CUSTOMER CARE ASSOCIATE Supervisor / Manager: CERVALO CORTES
 Date Hired: 01-30-19 Date of Separation: 05/17/19

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DEPARTMENT (SBU OF RESIGNING EMPLOYEE)				
• Resignation Letter		OK		5/17/2019
• Leaver Notice		OK		
• Proper Turnover of Duties and Responsibilities		OK		
• Training Materials		OK		
• Client Access		OK		
• Peripherals: Desktop, Mouse, Keyboard, Headset		OK		
• Training Bond		OK		
• Others:				
ADMINISTRATION (MWF 1:00PM – 6:00PM)				
• Parking Badge/ ID				
• Pedestal Keys (if loss provide duplicate)				
• Locker Keys (if loss provide duplicate)				
• Cellular Phone				
• Others:				
FACILITIES (MWF 1:00PM – 6:00PM)				
• Company ID/Access Badge				
• Door Keys				
I.T. (MON WED FRI 1:00PM – 6:00PM)				
• Deactivation of NT Login				
• Deactivation of Avaya Login				
• Deactivation of E-Mail				
• Others:				
FINANCE (WED 8AM – 12NN)				
• Un-Liquidated Cash Advances				
• Phone Charges Deduction				
• HMO Deduction				
• Others:				

Handwritten note: *Handwritten signature and date 6/20/19, with text 'CUSTOMER CARE ASSOCIATE' and 'HR'.*