## **COUNTY GOVERNMENT OF VIHIGA**



## STAFF EXIT CLEARANCE FORM (Rev.2/122022)

**Note:** Each employee leaving service of the County Government of Vihiga must complete this clearance certificate / or in the absence of the employee, the immediate Supervisor shall have the duty of ensuring that the form is duly filed. The clearance shall be the basis for conclusion of formal separation process.

Part 1:Biodata (to be filled by either the Exiting Employee or the Immediate Supervisor)	
Name of employee:	
National ID. No.: Payroll No.:	
Designation / Job title:	
Department:	
Section: Mobile No Mobile No	
Email:	
State reason for separation / leaving service of the County:	
Employee's / Supervisor's Name: Date:	
Part 2 (a): Immediate Supervisor's Clearance Remarks The Supervisor to confirm:	
that the employee has handed back any office keys, equipment and / or property in his/her possession: Yes / No. If No, explain:	
2. that where applicable, system access rights to the employee have been withdrawn: Yes / No / NA. If No, explain:	
Clearance Remarks by the Supervisor:	
The officer is under my immediate supervision and has been Cleared / Not Cleared	
Name:Designation	
Sign: Date:	

Part 2	(b): Immediate Director of the exiting employee
	nce Remarks by the immediate Director:
Part 2	(c): Chief Officer for the Respective Department, where employee was last deployed
Clearar	nce Remarks by the Respective Chief Officer:
Name:	Signature: Date:
Part 3:	1
keys ar	be applicable, confirm that the exiting employee has handed in Car keys / Motor cycle and daily work sheet files. Also indicate if the employee has any pending motor accident case, if any, explain details:
	nce Remarks by the T&I :
	Designation
	Date:
Part 3: Indicat	Finance and Economic Planning Department e Employee's status with regard to each of the following issues underFinance Department:
a) Out	estanding imprest KShsb) Outstanding salary advance KShsb
c)	Un-surrendered cash, KShs d) Salary over paid:KShs
e)	Outstanding house & Furniture rent KShs f) Other outstanding liabilities f)
g)	Outstanding Car Loan: KShs:h) Outstanding Mortgage/House Loan:h
i)	Fixed assets/Equipment (Surrendered / Not surrendered) Explain:
Clearar	nce Remarks by the Finance & Economic Planning:
	Designation
Sign:	Date:
Part 4:	Housing Section (Department of Lands and Physical Planning):
Verify a	and confirm employee's status with regard to housing by County Government of Vihiga:
a)	The officer has been in occupation of this House No Located at:
b)	The officer vacated the same House No. on (dd/mm/yyyy)
c)	Has damage been done to the house? Yes No
If yes,	what is the estimated cost? KShs
d) I co	onfirm that the section has Cleared / Not Cleared the officer.
Name:	Designation
Sign:	Date:

Part 5: Head of ICT Section  Confirm surrender of the following ICT equipment, if issued to the exiting employee  a) Computer Serial/No
Confirm Withdrawal of Network/System Access Rights: a) E-mail Account:b) Network Files:b
c) Group E-Account:d) Network Access Rights:
I confirm that the ICT section has Cleared / Not Cleared the officer
Name: Designation: Signature: Date:
Part 6:Director of Human Resource Management and Development  a) Unutilised Leave days as at the time of separation: If entitled to unutilized
leave, state amount due for commutation as per Law and policy: KShs:
b) The officer is Bonded O Not Bonded O
c) If bonded, state amount to be paid in lieu of the unserved bond period: KShs:
d) Car Loan payroll balance: KShs: e) Mortgage / House Loan balance:
f) Bank loan payroll balance; KShs (If any, the respective bank to b
notified of the exit as per the lending requirements endorsed by Management)
g) The officer's separation from the County is: In order O Not in order O
Clearance Remarks by Director HRM, if any:
I confirm that the Directorate of HR Management has Cleared / Not Cleared the Officer.
Name: Date:
Part 7: Chief Officer, Public Service Management and ICT
Clearance Remarks:
Name: Date:
Part 8: County Secretary and Head of County Public Service Subject to settlement of any outstanding liability that may have been noted above, the Officer has complied with all required clearance and is hereby released from Vihiga County.
Name: Date:
Part 9: PAYROLL MANAGER: I confirm deletion of the exiting employee from payroll
Name: Signature: Date: Payroll stamp
Part 10: Exiting Employee's Agreement / Concurrence with the above Comments a) Pursuant to provision under section J.27 of the HR Policies manual, I confirm having duly completed
<ul><li>and submitted the Income, Assets and Liabilities form to the Director Human Resource.</li><li>b) I AGREE / DO NOT AGREE with the content of this Exit Clearance form.</li></ul>