

Clearance Checklist



To be completed by the employee's manager, then signed by the employee and the manager, with each keeping a copy. This form is required to ensure that all Corporate assets are returned to company prior to the employee's last day of work as per the Resignation and Termination policies. Please use check boxes for either Collected or Not Applicable:

Collected	Not Applicable		Collected	Not Applicable	
<input type="checkbox"/>	<input type="checkbox"/>	Employee ID Card	<input type="checkbox"/>	<input type="checkbox"/>	Office / Building / Airport Keys
<input type="checkbox"/>	<input type="checkbox"/>	Laptop & Lock Key / Modem / LAN	<input type="checkbox"/>	<input type="checkbox"/>	IMAC Request Completed
<input type="checkbox"/>	<input type="checkbox"/>	Calling Card	<input type="checkbox"/>	<input type="checkbox"/>	Credit Cards
<input type="checkbox"/>	<input type="checkbox"/>	Parking: Card/Sticker	<input type="checkbox"/>	<input type="checkbox"/>	Maple Leaf Lounge Access Card
<input type="checkbox"/>	<input type="checkbox"/>	Access Cad	<input type="checkbox"/>	<input type="checkbox"/>	Cellular Telephone
<input type="checkbox"/>	<input type="checkbox"/>	Portable Electronic Device (Blackberry)	<input type="checkbox"/>	<input type="checkbox"/>	Pager
<input type="checkbox"/>	<input type="checkbox"/>	MOT ID Card #:	<input type="checkbox"/>	<input type="checkbox"/>	ACA / Airworthiness Card
<input type="checkbox"/>	<input type="checkbox"/>	Uniforms on Loan	<input type="checkbox"/>	<input type="checkbox"/>	Company Manuals
<input type="checkbox"/>	<input type="checkbox"/>	Uniform Care Agreement	<input type="checkbox"/>	<input type="checkbox"/>	Instructor's Manual / Guidebook
<input type="checkbox"/>	<input type="checkbox"/>	Company Drivers Licence	<input type="checkbox"/>	<input type="checkbox"/>	On Board Compensation Booklets (In-Charge only)
<input type="checkbox"/>	<input type="checkbox"/>	Employee # Stamp	<input type="checkbox"/>	<input type="checkbox"/>	Keys (Aircraft / Bar / Boutique)
<input type="checkbox"/>	<input type="checkbox"/>	Advances (Misc.)	<input type="checkbox"/>	<input type="checkbox"/>	Ear Protectors
<input type="checkbox"/>	<input type="checkbox"/>	Cash Floats	<input type="checkbox"/>	<input type="checkbox"/>	Badges / Wings / Insignia
<input type="checkbox"/>	<input type="checkbox"/>	Final Time Sheet	<input type="checkbox"/>	<input type="checkbox"/>	Safety Qualification Card
<input type="checkbox"/>	<input type="checkbox"/>	Tool Crib	<input type="checkbox"/>	<input type="checkbox"/>	Laundry Locker #

MANAGER'S RESPONSIBILITIES:

- 1) The employee's manager completes Clearance Checklist (Form ACF87) for all exiting employees.
- 2) The employee's manager is responsible for collecting and returning all Company Property that has been issued to the employee on loan as noted on the form.
 - a) The employee's manager takes necessary action with regard to the ID Card. The ID card must be collected from employees impacted by layoff, termination or resignation – these cards must be returned to Employee Services along with the Notice of Separation. Should the employee NOT provide the ID Card, an ACF23K ID & TRAVEL CARD RETRIEVAL FORM must be completed and returned to Employee Services. Retired employees retain their ID card.
 - b) Returns all other items collected to the proper issuing branch and/or agencies.
- 3) Completes an IMAC Request for Change Form to cancel the Novel Account, and to disconnect and remove personal computers and telephones, if necessary. The form can be found on the Aeronet home page under SOSIBM/Documents & Forms. This is required to avoid paying charges for unused telephone and IT services.
- 4) Contacts Corporate Real Estate via e-mail to advise of vacated office space, at one of the following addresses: CREyulbase@aircanada.ca (Montreal and Toronto); CRE.vendome@aircanada.ca; CREywgbase@aircanada.ca; CREyycbase@aircanada.ca; CREyvrbase@aircanada.ca

Manager's signature: _____ Date: _____

Manager's name (print): _____ Employee No.: _____

Employee's signature: _____ Date: _____

Employee's name (print): _____ Employee No.: _____

