

CIVILIAN PERSONNEL CLEARANCE CERTIFICATE

The proponent agency is CEHEC-CP

PRIVACY ACT STATEMENT. The disclosure of personal information is voluntary, covered by the privacy act of 1978. You are requested to furnish your social security number (SSN) under the authority of executive order 9397 dated 11-22-43. That order requires agencies to use the SSN for the sake of economy and orderly administration in the in the maintenance of personnel records. The furnishing of your SSN is voluntary and failure to furnish it will have no effect on you; failure to provide it, however may result in it being obtained from other agency sources.

NAME (Last, First MI.)	SEPARATION DATE (YYYYMMDD)	TYPE OF SEPARATION	ORGANIZATION
SOCIAL SECURITY NUMBER	FORWARDING ADDRESS		

NOTE: Departing Personnel will ensure clearing at each area specified on this form. No item may be self-cleared. All areas will reflect an authorized signature by an office representative designated for clear-out of functions identified. Supervisors will ensure submittal of a completed clearance certificate on their departing employee to CEHEC-CP, Room 3K65 prior to departure.

ISSUE STATIONS	LOCATION	INITIALS	DATE (YYYYMMDD)	ISSUE STATIONS	LOCATION	INITIALS	DATE (YYYYMMDD)
(1) KEY CONTROL OFFICER	OFFICE REP			(10) OFFICE EQUIPMENT & SUPPLIES/PROPERTY	3D65		
(2) DIRECTORATE/OFFICE CEFMS UPASS	OFFICE REP			(11) CUSTOMER SERVICE REPRESENTATIVE	3P41/45		
(3) DIRECTORATE/OFFICE SMARTCARD APPROVER	¹ KINGMAN BLDG. G1			(12) TRANSIT SUBSIDY REPRESENTATIVE	3P41/45		
(4) PARKING PASS OFFICE	1155			(13) CECS-OC (EOC Badges)	3J50		
(5) HEALTH CLINIC	1153			(14) NETWORK & EMAIL ACCOUNTS	HELP DESK 3M36		
(6) MAIL & FILE SECTION	3E55			(15) CEHEC-RM-F (Fax to)	(703) 428-8643		
(7) SECURITY OFFICE	3F14/16			(16) CREDIT UNION	3M34		
(8) TELECOMMUNICATIONS OFFICE (Telephone Services)	3S11			(17) CEHEC-CP (Last stop)	3K65		
(9) LIBRARY (Books & Material)	3R09						

MARK ONE AND INITIAL (Mailroom, 3E55)

- _____ INDIVIDUAL IS NOT A CUSTODIAN OF CONTROLLED DOCUMENTS
- _____ INDIVIDUAL HAS BEEN RELIEVED OF CUSTODY OF ALL CONTROLLED DOCUMENTS

THE EMPLOYEE IS IS NOT
 AN IMPAC CARDHOLDER AN IMPAC BILLING OFFICIAL

AN EMAIL MESSAGE HAS BEEN SENT TO THE AGENCY PROGRAM COORDINATOR (APC) AT CEHEC-CT TO ADVISE OF THIS EMPLOYEE'S DEPARTURE.

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE I HAVE COMPLETELY PROCESSED OUT THROUGH EACH ISSUE STATION LISTED ON THIS FORM.

DATE (YYYYMMDD)	SIGNATURE OF EMPLOYEE (Certification of completion)
-----------------	---

FOR SUPERVISORY EMPLOYEES ONLY - I CERTIFY THAT EMPLOYEE PERFORMANCE APPRAISALS HAVE BEEN COMPLETED AND SUBMITTED TO THE SENIOR RATER.

DATE (YYYYMMDD)	SIGNATURE OF EMPLOYEE'S SUPERVISOR
-----------------	------------------------------------

¹ Individual working in the GAO Building can fax ENG FORM O-2146 to CEHEC-IM, (703) 428-6450 for clearing. Smartcard (CAC) must be rendered to CPAC-COE personnel.