## Northern Michigan University Notification of Employment Change (Security Issues)

(Check One)

Name:	<ul><li>☐ Is Changing Campus Departments</li><li>☐ Is Leaving the University</li></ul>		
Effective:	_	•	
Current Department & Telephone Number:			
New Department, if applicable:			
Supervisor/Department Head: Before the last date of MUST BE MADE to the departments listed below to externed.		-	
On the last day of services, complete this form and d below. Forward the original form to Human Resource	•		•
	DATE NOTIFIED	NOT ISSUED	DATE RETURNED
Technology Support Services (E-mail account)			
Technology Asset/Business Management (Laptop Computer & Peripherals)			
Business Intelligence/Information Services (Passwords [BANNER], Telephone Number/Audix)			
Controller Office (Travel Cards)			
Financial Services			
Library (Books)			
NMU Police Department (University ID/Keys)			
Purchasing (Departmental Credit Card)			
I acknowledge that all University property has been	returned and the depa	artments have bee	n notified:
Employee Signature		Date	
Supervisor/Department Head Signature			