

**Republic of the Philippines**

**DEPARTMENT OF ENERGY**

**(Kagawaran ng Enerhiya)**

**CHECKLIST FOR SEPARATED EMPLOYEE**

Name of Employee : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bureau/Service/Office : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division/Unit : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Separation :

🞏 Resignation

🞏 Optional Retirement

🞏 Compulsory Retirement

🞏 Transfer to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Disability Retirement

🞏 Death

Effectivity of Separation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| # | Number of Copies |  | **Employee (Submit those with Tick/Check Marks Only)** |
| 1 | 1 original | 🞎 | Letter/Notice of Separation  (addressed to the Secretary; thru respective Division Chief, Director or Official, AS Director, and HRMD) |
| 2 | 1 original | 🞎 | DOE Office Clearance printed in legal size paper |
| 3 | 1 original | 🞎 | Statement of Assets, Liabilities, and Net Worth (SALN)  (as of the last day of government service) |
| 4 | 1 original | 🞎 | Sworn Affidavit of no pending criminal and/or administrative case, pursuant to RA 3019 |
| 5 | 1 original | 🞎 | Application for Terminal Leave Pay, using CSC Form No. 6, s. 1998 |
| 6 | 1 original | 🞎 | Identification (ID) Card, issued by the DOE |
| 7 | 1 original | 🞎 | Accomplished DOE Employee Exit Questionnaire |
| 8 | 1 original | 🞎 | Sworn Affidavit of Undertaking for Received CNA Benefits |
| 9 | 1 original | 🞎 | Sworn Affidavit of Non-Disclosure Agreement |
| 10 | 1 original | 🞎 | Ombudsman Clearance |

|  |  |  |  |
| --- | --- | --- | --- |
| # | Number of Copies |  | **HRMD (Prepare those with Tick/Check Marks Only)** |
| 1 | 1 original | 🞎 | Certificate of Leave Without Pay (CLWP) |
| 2 | 1 original | 🞎 | Certificate of Leave Balance (CLB) |
| 3 | 1 original | 🞎 | Certificate of Employment (COE) |
| 4 | 1 original | 🞎 | Service Record (SR) |
| 5 | 1 original | 🞎 | Notice of Salary Adjustment (SSL NOSA) |
| 6 | 1 original | 🞎 | Notice of Step Increment (NOSI) |
| 7 | 1 original | 🞎 | Notice of Salary Adjustment (S&T NOSA) |
| 8 | 1 original | 🞎 | Cover Memorandum to the Secretary |
| 9 | 1 original | 🞎 | Computation of Terminal Leave Pay |
| 10 | 1 original | 🞎 | Permission to Transfer |

Certified Complete : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Human Resource Management Officer

Date Received : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_