

IMS Clearance Form

Please note that this form must be completed in addition to any University required graduation forms and/or employee separation forms.

Name: _____ Date: _____

Employee ID Number: _____

UConn e-mail address: _____@uconn.edu

Advisor: _____

Office Number: _____

Lab Number(s): _____

****Your desk must be completely cleaned out upon departure.**

Please confirm the following:

I have properly labeled and stored all chemicals and samples that I used in my research. I have left my work space clean and safe. All IMS equipment, books, and supplies have been returned and accounted for.

Signature: _____ Date: _____

Please have your advisor confirm the following:

The student has properly labeled and stored all chemicals and samples used in their research. The student has left his/her work place clean and safe. All IMS equipment, books, and supplies have been returned and accounted for.

Signature of Advisor: _____ Date: _____

Please have Josh Strecker, Building Manager, confirm the following:

All IMS FOBs, swipe cards, and door keys have been returned to Josh Strecker.

Signature: _____ Date: _____

Please provide your forwarding address for mail:

Street/Unit: _____

City/State/Zip Code: _____

Personal non-UConn e-mail address: _____

****All first class mail will be forwarded to you for the first month following your departure.**

Please give your completed form to IMS Administrative Assistant Kate Cullen in room IMS-107.