



## Termination Check - Out Form

Name of the Associate:

Department of the Associate: .....

The primary purpose of this form is to ensure that all financial obligations to Future Worlds Center (Legally registered Cyprus Neuroscience & Technology Institute, Registered Number 72) are met and that all equipment belonging to Future Worlds Center is returned before a terminating associate leaves the Organization.

Last day of work:
The following actions have been executed in connection with the termination:
- IT department has been notified of any passwords allowing access to the computer system
- Every work related electronic document have been made accessible
- All printed and non printed materials such as books, leaflets, electronic files, copies of applications or other type of data has either been returned or secured from any unauthorized use
- All the keys of the offices have been returned
<ul> <li>Every travel expenses claim form, payment slip, timesheet, invoice for reimbursement regarding each and every project of the Associate have been completed, duly signed and submitted to the Financial Officer</li> </ul>
<ul> <li>All work related contracts and agreements including Gentlemen's Agreement, Confidentiality &amp; Proprietary Agreement etc as well as Self-evaluation Forms are duly signed and submitted to the Financial Officer</li> </ul>
- All technical equipment (including laptops, voice recorder, cameras etc.) belonging to the Organization have been returned.
This document certifies that undersigned the Associate mentioned above has satisfactorily completed all the requirements of the termination of contract, therefore the Associate has no further claim toward to the Organization and every belonging of the Organization has been returned.
Date:
Associate