

Confidential: Record will be held on RHB Personnel File
Reference: [Completion of Service Checklist](#), RHB Atlas

Name: _____ Commencement Date: ___ / ___ / ___
Designation: _____ Completion Date: ___ / ___ / ___

ITEM (as applicable)	DATE ISSUED	DATE RETURNED	OFFICE USE Collect and Return to relevant areas	
			CENTRAL AUSTRALIA	TOP END
Town-based Keys - Specify:			Staff Establishment	Corporate Services
Regional Hospital keys / swipe card / equivalent - Specify:			ASH Registry	Corporate Services
Identification Badge			ASH Registry	Corporate Services
Lockdown Key / Button			HCM	
Telstra Transfer Papers			Infrastructure Coordinator	
Computer & Accessories Specify:			Line Manager	
Mobile Phone & Accessories Specify:			Line Manager	
Community Based Keys Specify:			HCM	
Exit Housing Report			Infrastructure Coordinator	
CARPA STM				
Women's Business Manual				
Exit Interview Completed			Line Manager or http://internal.healthdwt.nt.gov.au/exit_interview/	
PCIS User Access			Line Manager	
Other:				
Aboriginal Land Permit			See Aboriginal Land Permits for information	

RETURNED:

Employee Signature: _____ Date: ___ / ___ / ___
Line Manager: _____ Date: ___ / ___ / ___

EXIT INFORMATION:

Forwarding Address: _____

Phone: _____ E-Mail: _____