



California State Library
Volunteer Exit Clearance Form

Name: _____

Location of Assignment: _____

Bureau/Section: _____

Last Day Worked: _____

ITB Equipment Check Out:

N/A Yes No (Please Explain Below)

Lap Top computer

Cell Phone

Comment: _____

Cleared By: _____ Date: _____

Security Check Out:

CSL Identification Badge

Building Security Key Card

Building Key(s)

Comment: _____

Cleared By: _____ Date: _____

Signature of Section Supervisor: Date:

Signature of Employee: Date:

