



**UNIVERSITY OF SRI JAYEWARDENEPURA**  
**Department of Chemistry**

**Postgraduate students**

Return this form to the Department of Chemistry on or before your last working day.

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**Department of Chemistry Exit Form**

Full Name: \_\_\_\_\_ ID No: \_\_\_\_\_

Degree Program: \_\_\_\_\_ Supervisor(s) Name: \_\_\_\_\_

First Day of Employment: \_\_\_\_\_

Last Day of Employment (this is the last day on your contract/study): \_\_\_\_\_

Work area/work bench (lab name and number/work bench number): \_\_\_\_\_

**Check list:**

\_\_\_ Return keys

\_\_\_ Clean glassware and equipment

\_\_\_ Return glassware and equipment

\_\_\_ Return unused chemicals

\_\_\_ Clean workbench

**Any Comments:**

Student Signature: \_\_\_\_\_

Technical Officer Signature: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

**AFTER COMPLETION, PLEASE RETURN THIS FORM TO DEPARTMENT OF CHEMISTRY.**