



DIVISION OF PERSONNEL SERVICES
RETIREMENT/RESIGNATION FORM

Legal Name: _____ Employee ID #: _____

Position: _____ Site: _____

Work Year: _____ Number of Hours Per day: _____

Date of Hire: _____ Last Day of Work: _____ First Day in Unpaid Status: _____

Effective Date of Retirement/Resignation: _____

Forwarding Address: Street Address: _____

City/State/Zip: _____

Phone: _____

Personal Email: _____

NOTE: Employees should be reminded to keep the Payroll and Personnel Office informed of current address for the mailing of income tax statements, etc.

Reason for leaving (you may attach a personal letter)

Retirement

Resignation (reason for leaving – you may attach a personal letter):

Personal

Relocation

Accepted Other Employment

Comments:

Date Resignation Verbally Received by Administrator or Manager: _____

Employee's Signature: _____ Date: _____

Date Resignation Received by Personnel Services: _____

Signature of Personnel Services Administrator

Date of Board Approval