



ALUM ROCK UNION ELEMENTARY SCHOOL DISTRICT

CLASSIFIED/CERTIFICATED RETIREMENT NOTIFICATION FORM

Classified CSEA, Teamsters, Supervisory & Certificated

TO: Director, Human Resources

FROM: _____
(Employee Name)

EMPLOYEE ID#: _____

DATE: _____

Please accept this as notice of my retirement from the Alum Rock Union Elementary School District. I

plan to retire from _____ at _____
Classification/Position & Grade Assignment School/Department

effective _____.
Date

I may be reached at: _____
Address

City State Zip

Area code and phone number

Employee's Signature

Date

Site Management's Signature

Date

Human Resources Management

Date