



Human Resources
P.O. Box 260005
Conway, SC 29528-6005

STATEMENT OF RESIGNATION

Name:	SSN:	Empl ID:
Position:	School/Department:	
Effective Date of Resignation:	Last Date Worked:	

I hereby resign my position from Horry County Schools based on the reason(s) below:

<input type="checkbox"/> Another position in education – In another SC district If so, what school district? _____ <input type="checkbox"/> Another position in education – In another state <input type="checkbox"/> Did not qualify for SC certificate <input type="checkbox"/> End temporary assignment <input type="checkbox"/> International teacher returning to country or origin <input type="checkbox"/> Leaving profession <input type="checkbox"/> Moving out of Area <input type="checkbox"/> Personal (Caring for child or aging parent, etc...) <input type="checkbox"/> Disability Retirement	<input type="checkbox"/> Position in administration – In another SC district <input type="checkbox"/> Position in administration – In another district <input type="checkbox"/> Returning to school to obtain an advanced degree <input type="checkbox"/> Teaching position in another SC district <input type="checkbox"/> Teaching position in another state <input type="checkbox"/> Termination other than certification or RIF <input type="checkbox"/> Unknown <input type="checkbox"/> Retirement <input type="checkbox"/> Other
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Comments of Employee (if any):

_____ Signature of Employee	_____ Date	_____ Signature of Principal/Hiring Mgr.	_____ Date
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Notice of resignation must be made in writing to the employee’s principal/hiring manager two weeks in advance of the effective date of such resignation for classified employees and one month in advance of effective date for professional employees. (Policies GCO/GBO)

NOTE TO PRINCIPAL/HIRING MANAGER: Retain a copy in school’s office and forward the original immediately to Human Resources. *Resignation is final upon approval by the Superintendent.*