

CLASSIFIED EMPLOYEE EXIT NOTIFICATION

Please complete requested information and return this form to Tammy.Roberts@rcstn.net, Human Resources, 800 M. S. Couts Blvd., Springfield, TN 37172

This form may serve as your official resignation/retirement notification.

| Name: | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Last Four Digits of Your Socia | al Security Number: | Phone #: |
| Address: | | |
| City: | State: | Zip Code: |
| School/Department: | Pos | ition: |
| Last Date to Work in Position: | | |
| Please indicate reason(s) for se | paration below: | |
| □Retirement □Moving From the Area □Profession Change □Salary/Cost of Living □Another Job Opportunity □Dissatisfaction with Job □Continuing Education □Other | | |
| immediate supervisor written reffective date of the last worked position in good standing. Upon resignation, I agree to suis not limited to, keys, electron All access to devices, RCS we email account, and other sites. | notice of resignation or ret day. Though notice isn't re arrender all property of Ro nics, employee badge, com bsites, etc. will be disabled | assified employee may voluntarily give their irement at least ten (10) workdays before the equired it is recommended in order to leave my bertson County Schools (RCS), which includes, but aputer equipment, etc., to the proper RCS authority. It will be excilable for rick up at the |
| I understand that my final pays central office upon the return of | | et deposited but will be available for pick up at the eklist. |
| Employee Signature: | | Date: |
| | HR USE | ONLY |
| Date Received HR Sig | nature | Personnel ReportSearchsoft Email SLB |



Employee Exit Checklist

| Principal, Imm | ediate Supervisor, or Direc | tor must initial and sign below indicating completion: | |
|---------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Employee Nam | ne (Print): | School: | |
| Initial: | Access/ID Card | | |
| | All RCBE Keys (e.g., building, classroom, desk, doors, drawers, filing cabinets, vehicle, etc.) | | |
| | | uters, IPAD, Apple pencils, AV hubs, remotes, phones, hot spots, | |
| Initial | Curriculum & Course Ma | | |
| · · · · · · · · · · · · · · · · · · · | Final Timesheet (if applic | | |
| · · · · · · · · · · · · · · · · · · · | Grades, Student Data Complete (if applicable) | | |
| | Reports (if applicable) | | |
| · · · · · · · · · · · · · · · · · · · | Vehicle/Transportation Equipment (if applicable) | | |
| | Shop/Classroom Tools & etc. (if applicable) | | |
| | Uniforms (if applicable) | | |
| | District Credit/Purchasing Cards (if applicable) | | |
| Initial: | District Accounts Clearar | ce (e.g., cafeteria, library, etc.) | |
| | low indicate Employee Ex | - | |
| Immediate Sup | ervisor/Principal: | Date: | |
| Employee Sign | nature: | Date: | |
| appropriate per | rson. There will be a ca | tup after all items are returned and the document is signed by the sh charge for any id's not returned. Bring this form and your yroll Coordinator, at the Central Office to receive your final | |
| | USE ONLY (Initial & Date | :) ID Received: | |