

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 Social S	ecurity Number:	Phone #:	
Address:			
City:	State:	Zip Code:	
School/Department:	Position:		
Last Date to Work in Position:			
Please indicate reason(s) for sepa	ration below:		
 Retirement Moving From the Area Profession Change Salary/Cost of Living Another Job Opportunity Dissatisfaction with Job Continuing Education Other 			

Robertson County School Board Policy 5.202 states a classified employee may voluntarily give their immediate supervisor written notice of resignation or retirement at least ten (10) workdays before the effective date of the last workday. Though notice isn't required it is recommended in order to leave my position in good standing.

Upon resignation, I agree to surrender all property of Robertson County Schools (RCS), which includes, but is not limited to, keys, electronics, employee badge, computer equipment, etc., to the proper RCS authority. All access to devices, RCS websites, etc. will be disabled within ten days of my last workday including my email account, and other sites.

I understand that my final payroll check will not be direct deposited but will be available for pick up at the central office upon the return of the Employee Exit Checklist.

Employee Signature:	Date:		
	HR USE ONLY		
Date Received HR Signature	Personnel ReportSearchsoftEmailSLB		
	Rev. 12/02/24		



Employee Exit Checklist

Principal, Immediate Supervisor, or Director must initial and sign below indicating completion:

 Employee Name (Print):
 School:

 Initial:
 Access/ID Card

 Initial:
 All RCBE Keys (e.g., building, classroom, desk, doors, drawers, filing cabinets, vehicle, etc.)

 Initial:
 IT Equipment (e.g., computers, IPAD, Apple pencils, AV hubs, remotes, phones, hot spots, cords/chargers, desk stands, docking stations, etc.)

 Initial:
 Curriculum & Course Materials

 Initial:
 Final Timesheet (if applicable)

 Initial:
 Grades, Student Data Complete (if applicable)

 Initial:
 Reports (if applicable)

- Initial: ______ Vehicle/Transportation Equipment (if applicable)
- Initial: _____ Shop/Classroom Tools & etc. (if applicable)
- Initial: _____ Uniforms (if applicable)
- Initial: _____ District Credit/Purchasing Cards (if applicable)
- Initial: _____ District Accounts Clearance (e.g., cafeteria, library, etc.)

Please contact the appropriate department for a list of items issued to the employee.

Signatures below indicate Employee Exit Checklist completed:

Immediate Supervisor/Principal: _____ Date: _____

 Employee Signature:

Final paycheck will be available for pick up after all items are returned and the document is signed by the appropriate person. <u>There will be a cash charge for any id's not returned</u>. Bring this form and your Access/ID Card to Sheila Clinard, Payroll Coordinator, at the Central Office to receive your final paycheck.

FOR OFFICE USE ONLY (Initial & Date)

Date: _____ Initials: _____ ID Received: _____

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