



HUMAN RESOURCES DEPARTMENT Resignation/Retirement

This form is provided for all employees submitting a voluntary resignation/retirement to terminate employment with Normandy Schools Collaborative. The form should be complete and submitted to your Building Administrator.

I hereby submit my voluntary Resignation Retirement from my position as:

Title of Position

Location

Grade

This resignation/retirement should be accepted as my final notification to terminate my employment with Normandy Schools Collaborative. I understand it is my responsibility to turn in my keys, laptop (if applicable), phone, ID badge to my site administrator.

My last day of work will be at the close of the school or business day on _____(mm/dd/yr)

Date of employee last work day_____ (mm/dd/yr)

I have notified PEERS or PSRS regarding my retirement.

I am terminating my employment for the following reason(s): **Code:**
Additional comments from supervisor or employee:

Reason Codes: FR = Family Responsibilities; HE = Health, JD = Job Dissatisfaction; M = Military Service; OJ = Other Job; OT = Obtain Training/Education, PL = Personal, RD = Retired Disability, RL = Relocation, RV = Retired Voluntary, JA = Job Abandonment (this code is used by supervisor to report job abandonments).

Employee/Signature:

Supervisor Signature

Date:

Date:

Print Name:

Address:

City

State

Zip

DOB:

Social Security Number (last four digits):

Phone Number: ()

Personal Email Address:

To Be Completed by School Administrator:

Items Returned: ___ keys ___ laptop ___ phone ___ ID badge ___ Company Credit Card

Administrator/Supervisor Signature:

Date: