

NOTICE OF RESIGNATION

Please complete and submit to Human Resources, District Office
human.resources@sspps.org

I, _____, hereby resign from my position(s) as:
(Print Name)

_____, _____
(Position) (Building)

This resignation is effective at the end of the work day on: _____
(Date)

Please include your forwarding/contact information:

Personal Email Address: _____

(Street/Address): _____

(City/State/Zip): _____

The reason for my resignation (please check the appropriate box):

- Retirement
- Employment with another school district
- Employment with an outside business
- Other (please explain): _____

Would you like to schedule a 30 minute in-person exit interview with HR? Yes No

I acknowledge that the information provided is accurate and complete to the best of my knowledge.

Signature: _____ Date: _____
