

LENNOX SCHOOL DISTRICT

• 10319 FIRMONA AVE. • LENNOX, CA 90304 • (310) 695-4000
Lennox Web Page: <http://www.lennox.k12.ca.us/>



RESIGNATION/RETIREMENT FORM

Date: _____

Lennox School District Attn:
Personnel Department 10319
Firmona Avenue
Lennox, CA 90304

Please accept my resignation/retirement from employment with the Lennox School District effective _____, 20____, my last day of work in the district.

I am resigning/retiring from employment with the District because:

Other comments:

Print Name

Position Held

Employee's Signature

Social Security Number:

XXX - XX- ____ - ____

Mailing Address

Site/Location

Received by: _____

Date: _____