



Human Resource Services

Resignation / Retirement

This form is provided for all employees submitting a voluntary resignation to terminate employment.

TO: The Superintendent and Secretary
Board of Education
Sacramento City Unified School District

I hereby submit my voluntary resignation retirement from my position as:

Title of Position	Location	Grade and/or Subject
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This resignation is unconditional, effective, and irrevocable upon receipt by the undersigned Superintendent's designee as "approved." I understand it is my responsibility to turn in my keys, phone, badge, equipment, etc., to my site administrator.

My last day of work will be at the close of the school or business day on _____ (mm/dd/yy). (Check if applicable)

I have contacted PERS or STRS regarding my retirement.

I would like to request an exit interview with Human Resource Services.

I am terminating my employment for the following reason(s):

Additional Comments:

<i>For Office Use Only</i> TERMINATION	
Agenda Date	
Accepted Date	
Reason	
Location	
Position #	
Approved / Position	
Reviewed	
Released <input type="checkbox"/>	
Site Notified	

Signature _____

Name Typed or Printed _____

Mailing Address _____

City _____ State _____ Zip Code _____

Date of Birth (mm/dd/yy) _____ Social Security Number (No Dashes) _____

Date (mm/dd/yy) _____ Area Code/Phone Number _____

Reason Codes: FO = Family Responsibility; HE = Health; JD = Job Dissatisfaction; M = Military Service; OJ = Other Job; OT = Obtain Training/Education; PL = Personal; RD = Retired, Disability; RL = Relocation; RM = Retired, Management; RV = Retired, Voluntary

Distribution: Human Resource Services; Employee Benefits; Employee