

First Name:	Last Name:	Date:
Classification:	Location:	ID#
Phone #	Personal Email:	
	0	If yes, when do you want the district to update your
Reason for Requesting Separation:		
Job Offer in Private Industry	Job Offer in Public Educat	tion Not Seeking Further Employment
Job Dissatisfaction	Relocating	Commute/Transportation Issues
Medical	Retirement	Other:
Retirement System: Call	PERS: CalSTRS:	
Certificated Retirement Bonus Payou	t if Qualified: March	June July
Requested Last Day of Employment/	Work: Reti	irement Date: (Retirement must begin at least one (1) day after Employment ends)
Employee Signature:		Date:
I hereby declare that <u>all</u> District properties token, etcetera, will be turned in prior	erty, including equipment, keys, access of to my last date of employment. I under eared and all District property has been	card, I.D. badge, materials, uniform(s), records, RSA erstand there may be a delay in receiving my final pay returned to the appropriate site or department.
Approved Final Day of Employment:		
Separation Accepted By:	Assistant Superintendent or Human Resources Desig	Date: