



Submission of Resignation or Retirement

Name: _____ Current Assignment/Location: _____

REQUEST: ☐ **Resignation** ☐ **Retirement**

Resignation - What type: ☐ Full ☐ Partial ☐ Transfer to new position with RSD

Certificated: If partial resignation, complete the following: FTE resigning: _____ FTE to work: _____

☐ I resign my current position with Ridgefield School District to transfer to the following position with Ridgefield School District: _____

My resignation from Ridgefield School District is for the following reason(s):

- ☐ Further Education ☐ Leaving Area
☐ Other Employment ☐ Family Responsibilities
☐ Other: _____

Retirement* - (check one)

- ☐ I will immediately receive a monthly benefit from TRS, PERS, SERS at the time of my resignation.
☐ I will be eligible to receive a monthly benefit from TRS, PERS, SERS at the time of my resignation, however, I am opting to defer receiving my monthly benefit until _____.
Date (if known)

*It is the employee's responsibility to contact the Department of Retirement Services to begin the retirement process. Benefits end on the last day of the month in which the resignation is effective. Contact Kalin Heath with questions: kalin.heath@ridgefieldsd.org

Resignation or Retirement -

My last active day of work will be: _____

My resignation or retirement day will be: _____

I understand that submitting my resignation constitutes severance of all contract relations with Ridgefield School District upon the effective date of my resignation.*

Employee Signature

Date

Current Mailing Address

Forwarding Mailing Address

City

State

Zip

City

State

Zip

Personal Email Address

Supervisor Signature: _____

*In addition to submitting a resignation form, teachers who are leaving mid-contract must be released from their contract by the District for their resignation to be effective.

Submit Form to Human Resources

Recommend Approval: _____

Disposition by Board of Directors: _____