

# Earlimart School District

## Notice of Resignation Form

Certificated     Classified     MSC     Sub/Temp

Name: \_\_\_\_\_ Social Security Number: XXX-XX \_\_\_\_\_

Department: \_\_\_\_\_ Site: \_\_\_\_\_

Job Title: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

I, \_\_\_\_\_ give this written notice that I am voluntarily resigning my employment effective \_\_\_\_/\_\_\_\_/\_\_\_\_ (my last day of work/resignation date).      Is your separation due to retirement?     Yes   

\_\_\_\_\_

Please state reason for resignation (use additional paper if necessary) \_\_\_\_\_

\_\_\_\_\_

Please update my personal records and send my W-2 to the following:

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

We would appreciate learning more about your work experiences gained during your employment with Earlimart School District. Your cooperation in answering the following questions in an open manner will allow us to evaluate our policies, procedures and training within our programs as we constantly try to improve the way we do business. Thank you for your assistance.

How would you rate the following at ESD?	Excellent	Above Average	Average	Below Average	Poor
Immediate Supervisor					
Cooperation within Department/Site					
Adequacy of Training Received by Department					
Rate of Pay					
Opportunity for Advancement within ESD					
Avenues of Communication with Immediate Supervisor/ESD					
Explanation of Job Duties/Responsibilities					
Explanation of ESD Regulations and Procedures by Department					
<b>If applicable please complete the following:</b> Benefit Plans and Options Provided by ESD					

**How would you describe your work experience with ESD?**

What did you like best about your job? \_\_\_\_\_

What did you like least about your job? \_\_\_\_\_

Which ESD policies, procedures, or benefit programs would you improve? \_\_\_\_\_

How would you improve them? \_\_\_\_\_

**If you are resigning to work elsewhere please answer the following:**

For which company, organization or district will you be working? \_\_\_\_\_

What type of work will you be doing on your new job? \_\_\_\_\_

What will be your new salary? \_\_\_\_\_ When will you start? \_\_\_\_\_

Are you requesting an exit interview?     No     Yes, I am requesting an exit interview with the person designated below:

Department/Program Supervisor

Cabinet

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Human Resources: \_\_\_\_\_ Date: \_\_\_\_\_

Superintendent or Designee: \_\_\_\_\_ Date: \_\_\_\_\_