


ST. VRAIN VALLEY SCHOOLS
academic excellence by design

Resignation/Retirement Form

I, _____, hereby submit my resignation from
(Print Name)

St. Vrain Valley Schools effective: _____.
(Last day expected to work)

I am Resigning Retiring from the following assignments:

(Position)	(Location)
(Position)	(Location)
(Position)	(Location)

For the following reason(s): _____

I will continue employment in the following assignments:

(Position)	(Location)
(Position)	(Location)

Please write your address and phone number in the space below:

I acknowledge that my supervisor is aware of my resignation. I understand my final check will be direct deposited on the next payroll cycle.

(Employee's Signature)	(ID Number)	(Date)
(Human Resources Signature)		

**Please return completed form to Human Resources:
395 S. Pratt Pkwy • Longmont, CO 80501 • Fax: 303-682-7366**