

**NOTICE OF RESIGNATION, TERMINATION, RETIREMENT OR TRANSFER**

Name: \_\_\_\_\_ ID: \_\_\_\_\_

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

Forwarding Address: \_\_\_\_\_  
\_\_\_\_\_

Date of Termination: \_\_\_\_\_

**OR**

Date of Transfer: \_\_\_\_\_ Dept. Transferred To: \_\_\_\_\_

Reason for Termination (please check one box)

- |  |   |
|--|---|
| <input type="checkbox"/> Job Dissatisfaction | <input type="checkbox"/> Discharge for Cause  |
| <input type="checkbox"/> Personal Reasons    | <input type="checkbox"/> Death                |
| <input type="checkbox"/> Relocation          | <input type="checkbox"/> Disability           |
| <input type="checkbox"/> Return to School    | <input type="checkbox"/> Contract Not Renewed |
| <input type="checkbox"/> Retired             | <input type="checkbox"/> Position Eliminated  |
| <input type="checkbox"/> Unknown             |   |

Would you rehire this employee? Yes  No Comments: \_\_\_\_\_  
\_\_\_\_\_\_\_\_\_\_  
Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**Human Resources Office Use Only** Date Received: \_\_\_\_\_

# Vacation Hours to be paid in final check: \_\_\_\_\_

P-card closed out? Yes  No  Due from P-card \$ \_\_\_\_\_

Date of Final Check: \_\_\_\_\_

*Integrating Faith in Learning, Leading and Serving*