

FRIENDSWOOD INDEPENDENT SCHOOL DISTRICT
NOTICE OF INTENT TO RESIGN OR RETIRE

1. NAME _____

2. CAMPUS/ DEPT _____

3. POSITION _____

4. SOCIAL SECURITY # _____

5. THIS IS MY NOTICE TO: (Check one)

Resign

Retire (Retirees must also contact Karen Myers in Administration.)

6. Last Day To Be Worked _____

7. Reason for Resignation

8. CONTINUE DIRECT DEPOSIT FOR FINAL PAYCHECK

OR

MAIL FINAL PAYCHECK TO:

9. Signature of Employee **Date**

10. Received by: _____ Date _____

Administration Office Use Only:

Separation Form Exit Interview Papers Release of Final Paycheck

Scheduled for Exit Interview on: _____ Interview complete