

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA
HUMAN RESOURCES
1960 LANDINGS BOULEVARD, SARASOTA, FLORIDA 34231
PHONE (941) 927-9000 FAX (941) 927-4087

RESIGNATION

Instructions: Print or type.

I, _____ resign from my position as _____
Employee Name Position

effective at the end of the day on _____, for the following reason (select one):
Date

- Personal
- Moving away from the area
- Taking a job in education in Florida
- Taking a job in education outside Florida
- Taking a job in Sarasota County Schools in a different bargaining unit position
- Other, explain _____

My last day of work was/will be (if different from resignation date) _____
Date

School/Dept. _____

Employee ID No. (A#) _____ SSN XXX-XX _____

Employee Signature Date

HR Use Only

Resignation Date _____ Board Date _____

Distribution: Original—Human Resources Personnel File Copy—Payroll