



NORTH EAST INDEPENDENT SCHOOL DISTRICT

Employee Notice of Voluntary Resignation or Retirement

Complete and sign the following form and return to your immediate supervisor. Please print clearly.

LAST NAME FIRST NAME MI

EMPLOYEE ID NUMBER

STREET ADDRESS CITY/STATE ZIP

CAMPUS/DEPARTMENT POSITION SUBJECT GRADE

IMMEDIATE SUPERVISOR _____
LAST WORKDAY _____

This is my notice to: (check one)

- Resign Effective date of my resignation ____/____/____
 Retire Effective date of my retirement ____/____/____

REASON

Have you completed your Teacher Choice Day* requirement? Yes No N/A

*The Teacher Choice Day is requirement for all Teachers and other professionals on a Teacher Work Schedule

****Retirees: Unpaid supplemental pay amounts may delay the processing of your TRS 7 form. If you are due an amount, please coordinate with the appropriate department or campus no later than one month prior to separation from the District to notify them of your retirement status.***

IMPORTANT: Before you turn this in to your immediate supervisor, please go online to the NEISD Human Resources Department Intranet homepage and click on the Separation link. Upon completion click the 'SUBMIT' button at the bottom and your form will be electronically sent to the Human Resources Department. If you do not have access to the Intranet please check the appropriate box below and a questionnaire will be mailed to you.

- Completed an Separation Questionnaire on-line
 Mail me an Separation Questionnaire

SIGNATURE OF EMPLOYEE DATE ____/____/____

SIGNATURE OF IMMEDIATE SUPERVISOR DATE ____/____/____

SIGNATURE OF DIRECTOR OF HUMAN RESOURCES DATE ____/____/____

For Official Use Only: Recommend employee for rehire? Yes No HR Form 1 Revised 12/10/08