



****IMPORTANT****

YOU MUST PRINT AND SUBMIT THIS COMPLETED A-4 (NOTICE OF RESIGNATION) TO PERSONNEL AFTER YOU'VE SUBMITTED YOUR EXIT SURVEY ONLINE (LINK AT THE BOTTOM)

A-4 (#9501)
(Rev. 2/24) Personnel

NOTICE OF RESIGNATION

PLEASE PRINT OR TYPE

Name: _____ Employee ID: _____
Job Title: _____ Site / Department: _____

Last Day Worked: _____

Mailing Address: _____
Street City / State Zip

Is this address and/or phone number different from what is currently on file? Yes No

IF MOVING FROM THE AREA, COMPLETE THE FOLLOWING:

Phone: () - C/O (if applicable): _____

Forwarding Address: _____
Number / Street City / State Zip

REASON FOR RESIGNATION:

Personal Decision Job Dissatisfaction (please explain on Exit Survey)
Relocation Retirement: Other: _____
Attend School Date: _____
Other employment (select all that apply):
Growth Opportunities Better Commute Work Schedule
Better Salary and/or Benefits Other: _____

Have you ever paid into the STRS or PERS retirement system? Yes: No

Would you like to remain as a substitute? Yes No PERS
STRS

Employee Signature

Date

BE SURE TO SUBMIT YOUR COMPLETED NOTICE OF RESIGNATION TO PERSONNEL AND ALSO COMPLETE THE EXIT SURVEY BELOW (YOUR FEEDBACK IS IMPORTANT TO US)

TRANSFER OF EARNED SICK LEAVE

In accordance with California Ed Code Sections 44979, 44980, and 45202, any employee of any school district, county superintendent of schools, or community college district who has been employed for a period of one calendar year or more whose employment is terminated for reasons other than action initiated by the employer for cause and who subsequently accepts employment with another California school district or county superintendent of schools within one year of the termination of his or her former employment, may request to have transferred, with him or her, to the school district or county superintendent of schools the total amount of earned leave of absence for illness.

PLEASE COMPLETE EXIT SURVEY BY CLICKING HERE