

GARDEN GROVE UNIFIED SCHOOL DISTRICT
Office of Personnel Services

EMPLOYEE RESIGNATION OR RETIREMENT

Name _____ Employee ID # _____

Address _____
Street City Zip Code Phone

I hereby resign/retire (**circle one**) from the following position and assignment now held by me as an employee of the Garden Grove Unified School District:

Position

School/Department

This resignation/retirement (**circle one**) is to be effective at the close of work on:

_____ (This is the last day you will work. For certificated employees, this is the last work day in your regular assignment.)
Month Day Year

The reason for my resignation/retirement is: _____

Employee Signature

Date

Signature of Administrator

Date

INSTRUCTIONS:

1. This form is to be completed by all employees who are resigning or retiring from positions with the Garden Grove Unified School District and is to be forwarded to the Office of Personnel Services.
2. If you wish, you may request an appointment with the Personnel Office for an exit interview.
3. You may use the back of this form to make comments regarding your employment with the school district.

FOR CERTIFICATED:

1. Contact the Orange County Department of Education for STRS Retirement Counseling (714-966-4251).
2. Submit this form to GGUSD Credentials Dept. (ext. 6349-elementary/ext. 6410-secondary).
3. Contact the GGUSD Insurance Office (ext. 6523 or 6495).

FOR CLASSIFIED:

1. Submit this form to GGUSD Classified Personnel Dept. (ext. 6161)
2. Contact the GGUSD Insurance Office (ext. 6523 or ext. 6495).

For Personnel Office Use Only:
Authorizing Signature/Personnel Services: _____

Board Approval Date: _____

Credentials: _____ Insurance: _____
