

OFFICIAL AND IRREVOCABLE NOTICE OF RESIGNATION

From:	(Employee)
To:	(Site Administrator, Department Lead)
Cc: Superintendent, Chief Business Official, Personnel File (HR)	
Date:	
This letter is to serve as my official, irrevocable resignation from the Larkspur-Corte Madera School District.	
Hours per week resigned:	
Position(s):	
Site(s):	
Last day of work:	
Effective date*:	
	calendar day after the last day that you work. Exceptions: If you are on leave, or your last of school, please make your effective date June 30th.
Comments:	
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Employee Signature:	
Accepted by:	(Superintendent or Designee)
Resignation is official and irrevocable upon receipt of both signatures.	
Employee Exit checklist	

- O Return Keys.
- O Return Technology.
- O Work Email will be suspended on effective date of resignation. Contact IT if you need assistance.
- O Verify address and email on file with Payroll and confirm final pay arrangements.