



COMPTON UNIFIED SCHOOL DISTRICT
Human Resources

Telephone: (310) 639-4321, Ext. 55041
FAX: (310) 764-5892

Resignation Form

(Complete all sections. Please submit this form to Human Resources)

Last, First and Middle	S. S. #(Last 4 digits only)	Classified	Certificated
Street Address	City	State	Zip Code () Telephone
E-mail address			
Job Title	Assigned Location	Teachers Only: Subject/Grade Level	

RESIGNATION, effective close of work (give exact date) _____

- Retirement
(Note: It is the responsibility of the employee to contact STRS or PERS regarding retirement benefits)
- Disability
- Employment, Other District
- Family Responsibility
- Marriage or Joining
- Spouse
- Changing Profession
- Personal
- Returning to School
- Teaching in Foreign Country
- Moving
- Other (please specify) _____

Signature of Employee	Date
Site Administrator	Date
Senior Director - Classified Personnel	Date
Chief Human Resources Officer/ Senior Director - Human Resources	Date

Accepted *

* ACCEPTANCE will be delayed until suitable replacement is available.