

BERING STRAIT SCHOOL DISTRICT
P.O. BOX 225
UNALAKLEET, ALASKA 99684
(907) 624-3611

RESIGNATION

INSTRUCTIONS: Complete form and submit to your immediate supervisor. A copy will be returned to you upon completion of Regional Office Action.

Name _____

I hereby submit my voluntary resignation as _____
(position)

effective _____ at _____
(month) (day) (year) (time) AM/PM

I wish to be released from my position because: _____

Forwarding Address: _____

Permanent Mailing Address: _____

Date (Signature of Resigning Employee)

Supervisor's Recommendation _____

Signature _____ Date _____

Superintendent's Action _____

Signature _____ Date _____

White - Personnel
Canary - Payroll
Pink - Return to Employee