



SAN DIEGO COMMUNITY COLLEGE DISTRICT

Retirement or Resignation Notice

Instructions: Complete one copy and submit it through your timekeeper to the vice chancellor or president to Human Resources.

- Hourly Academic
 Contract Classified
(Check all that apply)

Employee name (Last, first, middle)	Identification Number
College or Department	Position Title

I hereby request the Board of Trustees to accept the following:

Retirement

Last day in paid status: _____

First day of retirement: _____ STRS _____ PERS _____
(Retirement date into STRS or PERS must be after the last day in paid status.)

Resignation, effective end of the day: _____

Note: If any approved paid vacation is included in the date shown, please specify: _____

For Timekeeper use only: Location # _____ Position # _____
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For Payroll use only: Date of final paycheck: _____

For Human Resources Use Payroll Manager _____ Class. & Comp _____ Benefits Services _____ Business Services _____ Reason Code <input style="width: 50px; height: 15px;" type="text"/>

Employee signature	Date
Permanent address (number, street, city, state, zip) for final check	
President or Vice Chancellor's signature	Date