



Human Resource Services

Notice of Separation

Employee Name _____ Date _____

Social Security # _____ or Employee ID # _____

Department _____

Classification: Administrator; Classified; CAST; Faculty: F/T P/T; Short-term; Student

I, resign retire (check one), from my employment at Palomar Community College District.

Please indicate your last day in paid status: _____ (your retirement/separation date will be effective the following day).

When selecting "retire" your applicable retirement plan will be notified. Any request not to retire from such plan must be indicated in writing at the time your notice of separation is submitted.

[Classified Employees: The resignation of employee shall be final and effective at the time of receipt by the Superintendent/President or designee. An employee, however, may withdraw a resignation within forty-eight (48) hours (exclusive of Saturday, Sundays and holidays) after submitting it upon a showing of good cause. (B.P. CCE/AFT-24)]

My reason for separation is:

Employee Signature _____

Date _____

Supervisor Signature _____

Date _____

Administrator Signature _____

Date _____

Comments:

HRS has received the following (initial once received):

Keys	Employee ID Card	Parking Permit	Laptop Computer
Cal Card	Phone/Pager	Other:	

Retirement: STRS PERS Group I Group II Group III

Governing Board Notification Date: _____