



SCOTLAND COUNTY SCHOOLS

Human Resources Department

322 South Main St.

Laurinburg, NC 28352

Resignation Form

Name _____ Employee ID # _____

Address _____ Phone _____

City/State/Zip Code _____

All Current Positions: _____ Hours per Day: _____ School/Department: _____

NOTE: Submit to Human Resources immediately upon completion and signature. Do not hold/retain. Late submission can result in delays in acceptance. As a rule, resignations can only become effective once received in the Human Resources Office. Once submitted, the employee cannot rescind a resignation.

I hereby resign my position with the Scotland County Schools effective at the end of the day on _____ List position(s) resigning. _____

EXPECTED/REQUIRED NOTICE:

Classified Positions: At least fourteen (14) calendar days' notice is expected. Less notice will be included as part of the personnel record of the employee and may influence future district employment.

Licensed Positions: State law stipulates at least thirty (30) calendar days' notice. License revocation is allowable when acceptable notice is not given.

REASON FOR RESIGNATION: Check One (The numbers below represent state codes only)

- | | |
|---|---|
| _____ Retirement (66 or 68) | _____ Failure to Obtain/Maintain License (56) |
| _____ To Teach in Another NC System (58) | _____ Family Responsibility (57) |
| _____ To Teach in a NC Charter School (70) | _____ Relocation (61) |
| _____ To Teach in a NC Non-Public/Private School (71) | _____ To Attend School (60) |
| _____ To Teach in Another State (62) | _____ Job Dissatisfaction (63) |
| _____ Health (Personal or Family) (64) | _____ Career Change (63) |
| _____ To Accept a Non-Teaching Position in Education (59) | _____ To Accept Other SCS Employment: |
| _____ Other _____ (65) | New Position _____ |

Location _____

I wish to state that I have no claims or grounds for any claims against my employer based upon my time of employment with the Scotland County Schools and am submitting this resignation of my own free will. (Employee must send to Principal/Supervisor upon signing Resignation Form).

Employee's Signature

Date Signed

Principal/Supervisor Signature

Date Signed

(Principal must submit to HR Department upon signing Resignation Form)

Initial this box if you want to request an exit interview.

Initial this box if you are retiring