



# Faculty Employee Separation Form

**HR Use Only:**

Date of Hire: \_\_\_\_\_

Yrs of Service: \_\_\_\_\_

Board Agenda: \_\_\_\_\_

To: Superintendent / Human Resources

I, \_\_\_\_\_ hereby voluntarily resign my position with the Solano Community College District.

My last workday will be: \_\_\_\_\_

If retiring my retirement date with CalSTRS will be: \_\_\_\_\_

Reason(s) for leaving district employment:

\_\_\_\_\_

I hereby certify that the foregoing is a true statement of the reasons or cause of my separation from employment with the Solano Community College District.

Signature: \_\_\_\_\_ SCC ID#: \_\_\_\_\_ Date: \_\_\_\_\_

School/Department: \_\_\_\_\_ Position: \_\_\_\_\_

Mailing/Forwarding Address:

\_\_\_\_\_

\_\_\_\_\_