Wood County Educational Service Center

1867 N. Research Drive, Bowling Green, OH 43402 phone: 419.354.9010 fax: 419.354.1146

Employee Resignation Form – Regular & Supplemental Jobs

Printed Name :				
	Last	First	Middle	
Job Title:		Work Location	on:	
Effective Date	of Resignation fo	r TIME SLIP employees: _	List the date <u>AFTER</u> your last work day.	
Effective Date of Resignation for SALARIED employees resigning PRIOR to the end of their contract:				
contract: If you DO <u>teacher or</u>	want your pay stretc paraprofessional, or will end at midnight or	Stretch Pay hed over the summer, list the effe July 31 st if you are an administre	esigning at the END of their - YES ective date of <u>August 5th if you are a</u> <u>ator</u> . If you have ESC insurance, your hers & Paraprofessionals, and July for	
contract:		Stretch Pay		
last day oj			e effective date as the day AFTER your end at midnight on the last day of the	

Indicate Reason for Resignation:

 \Box Accepted New Job

 \Box Completion of Assignment \Box Relocation $\hfill\square$ Returned to School \Box Decline Assignment □ No Reason Given \Box Dissatisfaction with Job \Box Other: _____

Upon resignation, you must surrender all property of the Wood County Educational Service Center, which includes, but is not limited to; cell phone, laptops, software, keys, manuals, etc. to your supervisor.

Employee Signature:	Date:
Supervisor Signature: _	Date:

Upon completion, please return to: Wood County E.S.C., Office of the Executive Secretary.

Board Action Date: