



Request for Retirement/Resignation/Leave of Absence-All Employees

Please complete all of the information requested below. From time to time, following the separation of the employee, it is necessary to contact them with regard to outstanding issues which may include benefits and/or pay. Be sure to include an alternate phone number, particularly if you are relocating. Your AACPS Outlook email will expire upon separation. Please provide an alternate email address for follow-up contact, when necessary. Thank you!

Present Address _____

Forwarding Address _____ Effective Date _____

Telephone _____ Alternate Phone No. _____ Social Security Number _____

Home email address (for necessary follow-up information): _____

I, _____, will vacate my current position as _____ located in _____ (school/office location), effective _____ (last date of service).

The reason for my retirement/resignation/leave of absence (see note) is indicated on the list below:

I. _____(20) Retirement

- Service
- Ordinary Disability
- Accidental Disability

II. Resignation

A. Teaching (specify where)

- _____(41) Another country (_____)
- _____(42) Another state (_____)
- _____(43A) Another Maryland county (_____)
- _____(43B) Maryland State Department of Education
- _____(43C) Baltimore City
- _____(43D) An administrative or supervisory position in Maryland (_____)
- _____(44) A Maryland college or university (_____)
- _____(45) A private school (_____)

My primary reason for making the change in II.A above is (check one)

- _____ to be nearer home
- _____ better position in terms of qualifications
- _____ better salary
- _____ other (specify): _____
- _____ better working conditions

continued on reverse side

B. Other Voluntary Resignation

- ____(51) Government service
- ____(52) Business position
- ____(53) Defense work
- ____(54) Armed services
- ____(61) Further study at _____
- ____(62) Moving to _____ because of _____
- ____(63) Marriage
- ____(64) Maternity
- ____(65) Home responsibility (please explain further) _____
- ____(66) Personal illness
- ____(67A) Dissatisfaction with teaching as a profession because _____
- ____(67B) Dissatisfaction with any present position or with the county school system because _____
- ____(67C) Feeling of inadequacy to do a satisfactory job
- ____(68) Other (please specify) _____

III. Leave of Absence (provide proper documentation)

- ____(71) Further study at _____
- ____(72) Personal illness
- ____(73) Maternity
- ____(74A) Armed service
- ____(74B) Transfer of a military spouse
- ____(75A) Adoption of a child
- ____(75B) Care of an infant
- ____(75C) Severe illness of member of household
- ____(75D) Peace Corps
- ____(75E) VISTA
- ____(75F) Exchange teaching
- ____(75G) Overseas teaching
- ____(75H) Personal—Unit I Only (specify): _____

Remarks:

Signature

Date

NOTE: The number or letter designations are the codes by which causes of separation must be reported to the Maryland State Department of Education. The Board of Education of Anne Arundel County will use this information to study the causes of employee turnover in the local school system.

FOR OFFICE USE ONLY

____ GHRs Entry/Board Preparation
____ Weekly Log
____ HR Specialist

____ Supervisor
____ Director of HR
____ Board Exhibit/Audit

____ Inactivate File