



SEPARATION NOTICE

\_\_\_\_\_  
Last Name, First Name

\_\_\_\_\_  
Employee ID Number

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Dept./ Location

EMPLOYEE  
FORWARDING  
ADDRESS

\_\_\_\_\_  
Employee Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

☐ Check Here if  
New Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
\*Personal E-mail Address (**REQUIRED**)

*\*Note: All documents will be sent to this email address.*

This notice is to inform you of my intent to resign my position with El Paso Independent School District.

My proposed last day on duty will be \_\_\_\_\_.

**Please Note:** Official resignation acceptance will be determined by an authorized district representative in HR as outlined in EPISD board policy DFE (Local). You will be notified of the determination. Employees under contract are expected to fulfill contract requirements.

Please select the appropriate reason:

- |                                                                  |                                                                                      |
|------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> Relocating                              | <input type="checkbox"/> Pursue education                                            |
| <input type="checkbox"/> Pursue other position in education      | <input type="checkbox"/> Family circumstances                                        |
| <input type="checkbox"/> Pursue other position NOT in education  | <input type="checkbox"/> Medical Reasons                                             |
| Stay home                                                        | <input type="checkbox"/> Personal Reasons                                            |
| <input type="checkbox"/> Did not meet certification requirements | <input type="checkbox"/> Retire with the Teacher Retirement<br>System of Texas (TRS) |

**SUMMER SCHOOL:** Please select one:

- ☐ YES, I have applied/intend to apply for summer school.  
NO, I am not interested in working Summer School.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This section to be completed by Human Resources**

☐ ACCEPTED

\_\_\_\_\_  
*Human Resources*

\_\_\_\_\_  
*Date*