



LOS ANGELES COMMUNITY COLLEGES

HUMAN RESOURCES
770 WILSHIRE BOULEVARD
LOS ANGELES, CA 90017

ACADEMIC/CLASSIFIED SERVICES
RESIGNATION

This form is to be filled out by permanent academic full-time employees, adjunct employees, and classified employees resigning from the Los Angeles Community College District. Employees resigning because of retirement must also follow the procedures listed in Item 2C below.

Please print or type and ensure all information is provided as omissions can delay processing.

1. PERSONAL INFORMATION

Last Name First Name Middle Name Employee Number

Street Address (Use home address, not a District location or PO Box.)

City State Zip Code

Daytime Phone Ext. Evening Phone Cell Phone Email

Academic Administrator Faculty: Full Time Part Time
Classified Administrator
Other Classified
College/ESC
Job Classification(s):
Department(s):

2. RESIGNATION STATEMENT AND CERTIFICATION

- A. I hereby resign from all positions or assignments held by me as an employee of the Los Angeles Community College District. I understand that reinstatement within 39 months is a privilege and not a right and that denial cannot be appealed.
B. This resignation is to be effective at the end of the day on:
C. Give specific reason for resignation: Retirement Other: (Identify):

Resignation due to retirement: Your retirement date is the day after the resignation date. Completion of this form does not constitute an application for a retirement allowance. It is the employee's responsibility to obtain the necessary retirement application documents and to file them with the proper retirement system. For information contact:

Academic Employees: Membership Services Division, State Teachers Retirement System (STRS), Phone: (800) 228-5453 www.calstrs.com
Classified Employees: Benefits Division, Public Employees Retirement System (PERS), Phone: (888) 225-7377 www.calpers.ca.gov

- D. If eligible, indicate, which, if any, current temporary assignment(s) you wish to continue after retirement/resignation. If you fail to check a box we will assume that your answer is "None".
None
Academic Service: Adjunct position
Unclassified Service: Identify position:

E. Classified Service: For information on temporary work and/or eligibility lists options that may be available, contact the Personnel Commission directly.

F. I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Employee Signature Date
Division Dean/Vice President Date
President or Designee Date
Human Resources Official, ESC Office Date

3. ACKNOWLEDGEMENT:

Received: Date
By: Signature

INSTRUCTIONS
• Make a copy of this form for your personal records.
• Give the original form to your supervisor.
• Each location's management must acknowledge each resignation and then forward the original form to their location's Personnel Office for processing.
• Campus Personnel Office to forward form to Human Resources, Education Services Center.