

Bridgeton Public Schools
41 Bank Street
Bridgeton, NJ 08302

RESIGNATION/RETIREMENT FROM EMPLOYMENT FORM

Please Send Completed Form to Human Resources Office / Attn: Mrs. Lennita Porter-Linen
Send Copy to your Building Administrator

Date: _____

I, _____, hereby submit my resignation/retirement effective:
(please print)

Month Day Year

Reason for Leaving

<input type="checkbox"/>	Retirement
<input type="checkbox"/>	Resignation

(Signature)

(School)

(Position) If you are a teacher, please indicate grade level/subject.

To ensure we have a way to contact you after your separation, please provide the following information:

Personal Email Address _____

Current Address _____
(or updated address if moving) _____

Phone Number _____