



# SAN LEANDRO UNIFIED SCHOOL DISTRICT

## Certificated & Classified Personnel Resignation/Retirement

To: Personnel Services

Date: \_\_\_\_\_

From: \_\_\_\_\_  
Name (Please print) Site Position

I submit my resignation from the San Leandro Unified School District. My last work day was/will be \_\_\_\_\_.  
Date

This retirement is contingent upon May 2020 SLTA Retirement Incentive MOU

I am resigning for the following reason:

Retirement

Health

Relocating

Employment elsewhere

Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal/Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Senior Director, Personnel Services

\_\_\_\_\_  
Date

Need an answer to a question about CalPERS? Contact the toll-free Public Service unit: 1-888-225-7377, or write:

CalPERS  
P.O. Box 942704  
Sacramento, Ca 94229-2704  
Email: [www.calpers.ca.gov](http://www.calpers.ca.gov)

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Need an answer to a question about CalSTRS? Contact the toll-free Public Service unit: 1-800-228-5453, or write:

CalSTRS  
P.O. Box 15275  
Sacramento, Ca 95851-0275  
(916) 383-0181  
Email: [www.calstrs.com](http://www.calstrs.com)

Please contact:  
Employee Benefits Specialist  
Regarding your Benefits, Medical and Dental  
Phone: (510) 667-0537