

**Wakulla County School Board  
Human Resources Department  
Resignation/Retirement/Drop Form**

Employee Name: \_\_\_\_\_ EIN # \_\_\_\_\_  
(Please Print)

Position Resigning: \_\_\_\_\_ School/Center: \_\_\_\_\_

I hereby resign/retire from the above position with the Wakulla County School Board. This will take affect at the close of busines on:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month Day Year

The reason is **(you are required to check one)**:

- Employment in education **in** Florida
- Employment outside of education
- Employment in education **outside** Florida
- Personal reasons
- Retirement **service**
- Retirement **entering** Drop
- Retirement **exiting** Drop
- Disability Retirement
- Other, (please explain): \_\_\_\_\_

\_\_\_\_\_  
Employee Signature Date

\_\_\_\_\_  
Street Address City State Zip

Approved by the School Board on \_\_\_\_\_

\_\_\_\_\_  
Superintendent's Signature Date