



# WAKE COUNTY PUBLIC SCHOOL SYSTEM

## TENDER OF VOLUNTARY RESIGNATION

**\*\*\*\*\*Directions for Completing This Form\*\*\*\*\***

I hereby voluntarily tender my resignation from employment with the Wake County Public School System effective **at the close of the day on** \_\_\_\_\_ (month/day/year).

**Name:** \_\_\_\_\_ **Employee #** \_\_\_\_\_  
Last First MI

**Current Address:** \_\_\_\_\_

**Forwarding Address:** \_\_\_\_\_

**Personal E-mail Address (not WCPSS e-mail):** \_\_\_\_\_

*This forwarding address will be used to send tax documents and other WCPSS correspondence after the resignation date indicated above. If your address changes after you have submitted your resignation form, please e-mail [HR-OPT@wcpss.net](mailto:HR-OPT@wcpss.net) with your new information. Your personal e-mail address will be used to send an Exit Survey and compensation correspondence.*

**School or Department:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Resignation Details: (completion required)**

1. Do you currently serve in an extra duty position?  Yes  No

2. What extra duty position do you hold? \_\_\_\_\_

3. Are you a current North Carolina retiree?  Yes  No

- Reason (check one):**
- |   |   |
|---|---|
| <input type="checkbox"/> - To teach in a NC non-public/private school                                       | <input type="checkbox"/> - Moving due to military orders                    |
| <input type="checkbox"/> - To continue education  | <input type="checkbox"/> - Did not obtain or maintain license               |
| <input type="checkbox"/> - Family relocation  | <input type="checkbox"/> - Dissatisfied with teaching                       |
| <input type="checkbox"/> - Family responsibility/child care   | <input type="checkbox"/> - Career change                                    |
| <input type="checkbox"/> - To teach in another NC system  | <input type="checkbox"/> - Reason unknown                                   |
| <input type="checkbox"/> - To teach in another state  | <input type="checkbox"/> - Employment outside of education                  |
| <input type="checkbox"/> - Because of health/Disability   | <input type="checkbox"/> - To NC Charter Schools                            |
| <input type="checkbox"/> - Retired with full benefits   | <input type="checkbox"/> - To NC non-public/private school                  |
| <input type="checkbox"/> - Retired with reduced benefits  | <input type="checkbox"/> - Working Conditions                               |
| <input type="checkbox"/> - Re-employed retiree resigning  | <input type="checkbox"/> - To another state agency* – Please Specify: _____ |
| <input type="checkbox"/> - To non-teaching position in another school system in North Carolina? (Y/N) _____ | <input type="checkbox"/> - Other reason(s) Please Specify: _____            |

\*Any accrual balance must transfer to another state agency. Please submit a request with your new employer for balances to be transferred from WCPSS .

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising Administrator Signature

\_\_\_\_\_  
Date

**Once you have completed this form and page 2, return it to your principal or immediate supervisor.**

**Human Resources Use Only**

**Accepted** \_\_\_\_\_ **Human Resources Representative** \_\_\_\_\_ **Date** \_\_\_\_\_

# TENDER OF RESIGNATION FORM

Wake County Property to be returned upon employee's resignation or separation of employment.

Return all items to your immediate supervisor.

Employee's Name (print): \_\_\_\_\_

Employee's ID #: \_\_\_\_\_

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

Work Location: \_\_\_\_\_

Item	Serial #	Supervisor or Designee's Initials	Employee's Initials	Date Returned
ID Badge (Wake Co and School Badge)				
PC, iPad and other computer equipment including all cords and keyboards				
Keys (classroom, doors, etc)				
Intelli key/Swipe card				
Grade Book/Grade Records				
Other WCPSS property including phones				

Supervisor will:

- Record all applicable serial numbers and other identifying information. If not applicable, put NA in Serial # Box.
- Contact Security if there are any questions or concerns about the return of property.
- Send all badges to Ed Stansberry in HR.

Employee's Signature and Date: \_\_\_\_\_

Supervisor's Signature and Date: \_\_\_\_\_