



**ISSAQUAH
SCHOOL DISTRICT 411**

RESIGNATION/RETIREMENT NOTICE

NAME: _____

POSITION: _____

LOCATION: _____

EFFECTIVE DATE: _____

Please Check One:

Resignation

(Optional) Reason for leaving: _____

Retirement

Please remember to contact the Department of Retirement Systems in Olympia if you are considering retirement. The telephone number is **1-800-547-6657**.

Signature

Date

**PLEASE SUBMIT COMPLETED FORM TO: HUMAN RESOURCES
ATTN: SENA CAMARATA
ISSAQUAH SCHOOL DISTRICT
5150 220th AVE SE
ISSAQUAH, WA 98029**