

**SPARTANBURG SCHOOL DISTRICT TWO  
OFFICE OF PERSONNEL  
4606 PARRIS BRIDGE ROAD  
BOILING SPRINGS, SOUTH CAROLINA 29316**

**STATEMENT OF RESIGNATION**

NAME: _____	SS#: _____
POSITION: _____	SCHOOL/DEPT.: _____
EFFECTIVE DATE OF RESIGNATION: _____	LAST DAY WORKED: _____

**I hereby resign my position from Spartanburg School District Two based on the reason (s) listed below:**

_____ Accept Other Work	_____ Certificate Difficulties
_____ Disability Retirement	_____ Dissatisfaction With Job
_____ Family Reasons	_____ Health Reasons
_____ Accept Work-Other SC School District	_____ Leaving Profession
_____ Moving Out of Area	_____ Accept Work-Out of SC School District
_____ Retirement	_____ Long Term Disability
_____ Seek Other work	

Comments of Employee (if any):

<b>Signature of Employee</b>	<b>Date</b>	<b>Signature of Principal</b>	<b>Date</b>
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Notice of resignation for classified employees must be made in writing to the employee's principal or supervisor two weeks in advance of the effective date of such resignation. (Policy GCO)

Notice of resignation for certified employees must be given with sufficient notice to allow the district administration to find a suitable replacement. If a teacher leaves his/her position without notice or without the approval of the administration and/or school board, the board may initiate legal action against the teacher which may result in the revocation of the individual's teaching certificate. (Policy GBO)

**NOTE TO PRINCIPAL/SUPERVISOR:** Retain a copy of this form in the school's office and forward the original immediately to the Office of Personnel. *The resignation is final upon approval of the Superintendent.*