



## BOONE COUNTY SCHOOLS EMPLOYMENT RESIGNATION

TO: **Superintendent  
Boone County Schools  
8330 U.S. Highway 42  
Florence, KY 41042**

ATTN: **Human Resources  
Administrator/Supervisor**

I, \_\_\_\_\_, hereby resign my position as a  
(print name)

\_\_\_\_\_, at \_\_\_\_\_.  
(position) (location/school)

***Note: 12 month employees must use any unused vacation prior to the last day of work (unless otherwise approved by the superintendent or designee.)***

☐ I also hold the following position(s) that I am resigning from: \_\_\_\_\_

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

Retirement Date: (if applicable) \_\_\_\_\_

My reason for resigning other than retirement is: \_\_\_\_\_

I may be contacted at: (address) \_\_\_\_\_

Phone #: \_\_\_\_\_

\_\_\_\_\_  
(Signature\*\*)

\_\_\_\_\_  
(Employee Number)

\_\_\_\_\_  
(Date)

***\*\*Disclaimer: Signing this form informs Human Resources that you have notified your Supervisor/Principal of your pending termination.***

Received by \_\_\_\_\_ Date \_\_\_\_\_