

RESIGNATION FORM FOR HSC SOM FACULTY

Name: _____ Banner ID: _____

Department: _____ Division: _____

Date submitted to Department Chair or Division Chief: _____

Last day on site: _____

Last day of paid employment: _____

Number of hours of annual leave to be used before termination date: _____

(Optional): Maximum annual leave hours to be paid: _____ Banner Index: _____

According to the annual leave policy 3400.7.1, “employees are paid for unused accrued annual leave, not to exceed the following maximum limits of 168 hours.”

Does this constitute the required four month notice as stated in the IMA below?

“If the Faculty Member resigns as a UNM employee, the Faculty Member will provide the University with four (4) months written notice in advance of the intended termination date. Failure by the Faculty Member to provide such notice will be cause for the Faculty Member to be liable for payment to the University of a penalty of up to three (3) months of compensation (including the value of fringe benefits) for employment under the Faculty Member’s current employment contract with the University.”

If yes, check here

If no, please explain:

Faculty Member: _____
Date

Division Chief: _____
Date

Department Chair: _____
Date

Dean: _____
Date