## PLANO INDEPENDENT SCHOOL DISTRICT SUBSTITUTE RESIGNATION

This form is to notify the Plano Independent School District of my resignation from my current substitute position. The following information is to be used to complete the resignation process.

Today's Date:					
Social Security Num	ıber:			_	
Name:					
(Please Print)	First	М	liddle		Last
Current Address:	Church	A b. #	City Chata		7:- Cada
	Street	Apt. #	City, State		Zip Code
Phone Number(s):	(Home)		E-mail:		
	(Cell)				
Effective Resign	ation Date:				
Reason for resign	nation (please so	elect one):			
Accepted e	mployment outsid	de of Plano ISD.			
•	ull-time employme			e system.	
	art-time employm sign from my subs		SD		
and will co	art-time employm ntinue to work as ed to work in my r	a substitute on d		<u>l</u>	
Moving	*If you have a ne	w address, please	e complete a	Change of	Address Form.
Other:					
Signature		Printed Name		Date	
Completed form m	ust be submitted	by mail, fax, or e	-mail:		
<u>Mail</u>		<u>Fax</u>	27 5		E-mail
Plano ISD – Human Resources		469-752-803	,	your last na	me send to: isol sonoda@nisd edu

N - Z

dollie.thomas@pisd.edu

2700 W. 15<sup>th</sup> Street, Plano TX 75075