

RESIGNATION – RETIREMENT LETTER

Your name (p	lease print):
Your Employe	ee Number
Please ac	cept this letter as the official notification of my:
(Check <u>one</u>)	
	Resignation
	Retirement - I am applying for PERA retirement benefits. (Contact PERA - 1-800-759-7372, www.copera.org ; there are also PERA forms to complete) Retirement with 110 request - I am applying for PERA retirement benefit and am requesting to work after retirement for one additional school year. (Contact PERA - 1-800-759-7372, www.copera.org ; there are also PERA forms to complete)
Effective Date	e (this is my last date of employment):
Your Signatur	r e: Date:
Your Supervis	sor's Signature (required only if requesting the 110):
	Date:
Please add an	y additional information that you would like to include (optional):

Optional: If retiring through PERA, please attach the blank Final Six Months' Salary Report to this form, if you have it.