

**South Colonie Central Schools  
Recommendation For Acceptance of Resignation, Retirement  
Or Termination of Support Personnel**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Title of Position** \_\_\_\_\_

**School/Location** \_\_\_\_\_

**Resignation/Retirement for the following reasons:** \_\_\_\_\_

\_\_\_\_\_

**Termination for the Following reasons:** \_\_\_\_\_

\_\_\_\_\_

**Effective Date:** \_\_\_\_\_

**Agenda Date:** \_\_\_\_\_

**WRITTEN RESIGNATION MUST BE ATTACHED**