



CITY COLLEGE OF SAN FRANCISCO (CCSF)

Department of Human Resources
50 Frida Kahlo Way, Bungalow 702
San Francisco, CA 94112
415-452-7660

Intent to Resign & Retire
Academic Employees Form E30

Board Resolution: _____

To: CCSF Human Resources:

		<input type="checkbox"/> AD <input type="checkbox"/> FT <input type="checkbox"/> PT
Name	ID#	
Address	City, State Zip	
Department	Home Phone	

1. I am: **Resigning** from my position (date) _____

OR

Retiring from CCSF (date) _____

2. I am: District Funded (Hourly) Categorical/Grant Funded Tenured

3. Retirement system: CalSTRS SFERS PERS CalSTRS Disability Retirement

4. I am on the CalSTRS Pre-Retirement Program (Willie Brown): No Yes

I voluntarily resign or retire from City College of San Francisco (CCSF) from the date shown above. I acknowledge and understand, after I submit the Intent to Resign Form to CCSF, I cannot rescind my resignation or retirement date with City College of San Francisco.

Employee's Signature

Date

Your resignation/retirement was received and accepted

AVC Human Resource's Signature

Date