

Separation of Employment

Read Carefully:

- Health benefits will **end** the last day of the month of your employment separation date.
- Call the ASD Payroll Department at 253-931-4925 if you have questions regarding your final paycheck.
- If retiring, call DRS at 800-547-6657 to confirm eligibility and to discuss impacts to pay and service credit based on your chosen separation date. Please contact HCA at 800-200-1004 to discuss health benefits eligibility through PEBB.
- Complete and submit Separation of Employment from to HR Strand Specialist.

Employee Name:	Building/Dept:
Address:(Final W2 s	
(Final W2 s	statement will be sent to this address)
Phone Number:	Personal Email:
	ning/retiring from my position with the Auburn School District, and fits and that the dates submitted are final and cannot be changed.
Signature:	Date:
Notification of:	
Resignation – Separation Date:	Position:
Please check primary reason(s) for your resign	nation:
Personal Position with another	WA District: Relocation
☐ Education ☐ Other (Please Explain):	:
Retiring and Collecting Monthly Pensi	on – Retirement/Separation Date:
Retiring and Deferring Monthly Pension	on – Separation Date:
Resignation from Extra Assignment O	nly - Effective Date:
Additional Information:	
Please check if you wish to enter in	nto the Substitute Pool
(Our Substitute Coordinator will conto	
FOR I	DISTRICT OFFICE USE ONLY
HR Approval:	Date: