



EL MONTE UNION HIGH SCHOOL DISTRICT

Retirement Form

Date: _____

I, _____, hereby retire from my position of:

_____ at _____
Position Title Site

My last working day will be: _____

Employee's Signature Social Security Number

Address City State Zip

Telephone Number

Signature of Immediate Supervisor Date

----- **DO NOT WRITE BELOW THIS LINE** -----

Received by Human Resources on: _____ by: _____

Signature of Assistant Superintendent for HR Date

Board Approved: _____