## FULLERTON SCHOOL DISTRICT PERSONNEL SERVICES

## RETIREMENT FORM

NAME:	LOCATION:
Address:Street	 City/State/Zip
Street	City/State/Zip
Please accept this as my final decision that I	will be retiring from the Fullerton School
District on	
This date will be my last working day in paid	status under my contract.
Additional Comments:	
I would like to continue working as a substit District.	ute teacher with the Fullerton School
Yes: No:	
Employee Signature:	Date:
Approved:	Date:
Assistant Superintendent/Person	inel Services

32650 (3/05) Distribution: Original- Certificated Personnel; 1 Copy- Principal