

Johnston Community Education End of Employment Form

Staff Name: _____

Position _____

Last Day to Work _____

Address _____

City _____ State _____ Zip _____

Telephone #: _____

Cell phone #: _____

Email Address _____

Address to send last paycheck: (If different than above)

Address _____

City _____ State _____ Zip Code _____

Address to send W-2: (If different than above)

Address _____

City _____ State _____ Zip Code _____

Attach copy of resignation letter or write resignation on back of this form.

Resignation accepted by on-site _____ Date _____

Resignation accepted by CE Office _____ Date _____

Office Use Only:

Last day work: _____ Vacation Remaining: _____ Last pay date: _____

Update IFAS after last day: on main tab change "Type" to resigned ; Change "HR" from A to I; remove "KTC Division" in primary tab; on term info tab under "last worked" put last day of work; check address tab so matches the end of employment form
_____ by _____ date _____

Remove badge accessibility in Ccure: _____ by _____ date _____

Badge returned to KTC Specialist: _____ by _____ date _____

Deactivate employee in Safe Schools: _____ by _____ date _____

If sub-onsite with district email, let IT know to remove them. If have vacation balance, needs to be on leave sheet and added to timesheet to go with final check.

Resignation Letter: (Reason for leaving position)