

CERTIFICATED EMPLOYMENT SEPARATION

Notice to the Conejo Valley Unified School District Board of Education

I,		give this	s written not	ice that I am	voluntarily
Employee Name					
☐ Retiring ☐ Resigning from my employment at					
			Subject/Departn		
My last day of work will be If retiring	ng, my STRS r	etirement d	ate will be _	t least 1 day AFTER	R last day of work
Please send my W-2 to the following address:					
Street Address: Ci	City		State Zip		
Contact Info for benefit information*:	Email		Phone Number(s)		
Per Article 7 of UACT/CVPPA Contracts:					
If age 50 - 64* and have 10 years or more of District service, please chec □ I am eligible for and requesting medical benefits at my expense. If age 55 - 64* and have 15 years or more of District service, please chec □ I am eligible for and requesting District-paid medical benefits. We would appreciate learning about your reaction to some of your	☐ I am eligib ck applicable box ☐ I am eligib	le for and decl k below - OR - le for and decl	ining self-paid i	medical benefits and Eligible for aid medical ben	s. or Medicare nefits.
Unified School District. Your cooperation in answering the follow policies, procedures and program as we constantly try to improve the	ing questions in	n a forthright	manner will	allow us to e	evaluate our
1. How would you rate the following at CVUSD:	Excellent	Above Average	Average	Below Average	Poor
Immediate Supervisor					
Cooperation within Department					
Adequacy of Training Received					
Rate of Pay					
Opportunity for Advancement					
Avenues of Communication					
Benefits Plans Provided by CVUSD (if applicable)					
Explanation of Job Duties/Responsibilities					
Explanation of Pay Plan/Benefits					
Explanation of CVUSD Regulations and Procedures					
What did you like best about your job? 3. What did you like least about your job?					
4. Which CVUSD policies, procedures, or benefit programs s	hould be impre	oved? How	would you i	 mprove ther	 n?
	•		•		
Would you like to request an exit interview with the Assistant	Superintender	nt, Human R	Resources?	☐ YES	□ NO
Employee Signature			Date		
FOR HUMAN RE	SOURCES ON	ILY			
YES					
Date Received in HR / Initials Early Tell Bonus?	BOE Date	_	Exit Interv	iew Date, if a	pplicable



Supervisor, please collect the following:

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Separation of Services Procedures

The employee's immediate supervisor should complete this checklist when an employee is separating service from the District. Initial all applicable areas; write N/A for areas that do not apply to this employee. You should notify the Human Resources Office if an employee fails to turn in necessary keys, equipment and supplies.

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Letter of Retirement or Resignation form was sent to and received by Human Resources.
Verify absence reports and timesheets completed.
Key(s) Returneddoor(s) alarm code file/cabinet/desk
Work Order submitted to Technology Services to remove name from email list and phone system, and to reset password for VM, QSIS, SIRAS, and other related programs.
Equipment/Supplies turned in; confirm inventory of books, manuals, classroom supplies, library materials, etc.
Work Station/Office/Classroom cleaned out
Cell phone returned, if applicable
Laptop and other electronic devices returned
Employee's Signature
Supervisor's Signature

Please print out this form, sign and return to Certificated Human Resources.