



Baltimore County Public Schools
 Division of Human Resources
 6901 N. Charles Street
 Towson, MD 21204

RESIGNATION FORM

Personal Information		
<i>Instructions: Please complete all of the information below and submit electronically to the Division of Human Resources.</i>		
Last Name:	First Name:	Middle Initial:
Personal Email:	Phone Number:	
Employee ID Number:	Job Title:	Grade/Subj:
Social Security Number: xxx-xx-	School/Office:	
Last day of work:	Resignation effective date (if on leave):	
Reason for Resignation/Retirement		
<i>Check the appropriate boxes as it pertains to your resignation/retirement.</i>		
I will be resigning <input type="checkbox"/> retiring <input type="checkbox"/> from Baltimore County Public Schools for the primary reason noted below (choose one):		
RESIGNATIONS	RETIREMENTS Subject to Approval by the Appropriate Retirement System*	
Accepted Other Position Continuing Education Dissatisfied with Position Home Responsibility Military Service Personal Illness Relocation Resign from Leave (select type): Seek Other Employment Other:	Type of Retirement: Regular Service Retirement Disability Retirement Retirement System: Maryland State Retirement Agency – 410-625-5555 Baltimore County Employees’ Retirement System – 410-887-3132 <i>*Important: It is the responsibility of the employee to determine if they are eligible to apply for retirement by contacting the appropriate retirement system. As noted in Superintendent’s Rule 4202, the retirement agency administers all benefits provided under the pension plan and will determine creditable service of its members.</i>	
By signing below, I agree to comply with checkout procedures at my school/office and will return all Baltimore County Public Schools’ property. In accordance with Superintendent’s Rule 3710, <i>Identification Badges</i> , Section III, I will return my identification badge to my supervisor prior to leaving the school system.		
Employee comments:		
Print Name:		
Employee Signature:	Date:	
Administrator’s/Supervisor’s Name:		

Once the form is completed, print, sign, and date the form. Send via email to Resignbcps@bcps.org, or send by interoffice mail to Human Resources, Greenwood, Building E, or send via U.S. mail to the address listed at the top of the form.

RESET FORM