

Mobile County Personnel Board

Employment Separation Form

(Effective 02/01/2024)

Date of Request: _____

Check one: R	ESIGNATION	RE '	TIREMENT	Γ			
First Name		MI	_ Last Nam	e			
Jurisdiction	liction Department						
Job Title							
Effective Date (Date	after the last payr	oll day): _					
I am resigning to tal		-					
	FOR MERIT						
Leave Balance Tran	sfer: Appro	oved	Not Appro	ved	VA Hours	Sick Hours	
I wish to resign/	retire on the date	listed abo	ove.				
Employee's Signatu	re				Date		
	ach a separate pag						
This resignation is a Reason if not in Goo	_	Good Sta	nding	Not in Go			
	ks notice given			v	ter notice was	given	
Appoi	inting Authority (or Designe	e Signature			Date	
APPROVED:	Personnel Dire	ector or Do	esignee Sign	ature		Date	

Revised: 03/28/2024