

BOARD OF COUNTY COMMISSIONERS HAND COUNTY SOUTH DAKOTA

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EMAIL: commissioners.handcounty@midconetwork.com http://hand.sdcounties.org/
Community Alerts by www.alertsense.com

Standardized Resignation Form for use by hourly employees in all departments: (Please Print Clearly)

| Employee's full name: | Employee's D.O.B.: <br> Employee's Last 4 SSN: |  |  |  |
| :--- | :--- | :--- | :--- | :---: |
| Employees: Address |  | Employee's phone <br> number: |  |  |
| Date the employee <br> completed this form: | Effective Date of <br> Resignation: |  |  |  |
| Employee's Signature: |  |  |  |  |
| Date employer received <br> this form: |  |  |  |  |

## Office / Agency / Department:



Assessor / Zoning
Auditor / Welfare
Treasurer / Passports
Register of Deeds / Driver Licensing
4-H
Veteran Services Office
Sheriff / Inmates (Jail)
Emergency Management / 911 Services
Custodian
States Attorney's Office
Weed and Pest
Library
Highway Department
Appointed Board Member (non-elected)

## Reason for leaving: (Check all that apply)

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Retirement
Seasonal / End of Season
Left for better employment / wages
Conflict with supervisor(s)
Failed to meet expectations of employment

## Employee's Perception:

Leaving on "Good Terms"
Leaving on "Marginal Terms"
Leaving on "Poor Terms"


Failed to meet expectations of employer
Wrong job or wrong time
Underqualified for position
Overqualified for position
Hostile work environment

Employee willing to return to work.
Employee willing to work part-time.
Employee not willing to return.

## Employee's willingness to work in the future:

## Employer's Perception:

Left on "Good Terms"
Left on "Marginal Terms"
Left on "Poor Terms"

## Employer's willingness to re-employ:

Employee able to be re-employable
Employee able to return part-time
Employee not welcome to return.

Employee's Comments to the Administration: (use back side of page if needed)

