

TO: TOB Human Resources Manager

FROM: Blacksburg Transit

SUBJECT: Resignation Form

I, _____, am voluntarily resigning my position of:

_____ Operator I _____ Operator II _____ Access II

_____ Dispatcher _____ Scheduler _____ Supervisor Assistant _____ Trainer

with Blacksburg Transit, due to:

_____ Other Employment _____ Full-time _____ Part-time

_____ Graduation

_____ Other: _____

My last day of work will be _____. I understand that by resigning, I will no longer have the ability to use the Town of Blacksburg's grievance process, as outlined in Section 7 of the Town of Blacksburg's Rules & Regulations. I also acknowledge that if resigning under circumstances of pending disciplinary action, a future employer may become aware of these pending actions. If the employer executes a release that I have signed with that employer, the nature of the pending disciplinary action by be revealed by the Town of Blacksburg.

My mailing address after my resignation will be:

Initial Box

I acknowledge that after my last shift, I must return my ID/Keycard and any other Town of Blacksburg property I was issued during my employment.

Date

Employee's Signature

Acceptance of Resignation

On behalf of Blacksburg Transit/Town of Blacksburg, I accept this resignation, effective

Date

Operations Supervisor, SA, or Dispatcher's Signature

Approved

Date

Human Resources Generalist Signature