

STATE OF ALABAMA)
CITY OF TUSCALOOSA)

**UNCONDITIONAL RESIGNATION AND NOTICE OF RETIREMENT (IF
APPLICABLE) FROM EMPLOYMENT WITH THE
CITY OF TUSCALOOSA
(A01-0166)/(A01-0372)**

COMES NOW _____, City Employee
Identification No. _____, Job Classification _____, and
hereby submits to the Human Resources Department his/her unconditional resignation
and/or notice of retirement from employment with the City of Tuscaloosa.

CERTIFICATIONS:

I hereby certify to the Human Resources Department the following:

1. That this resignation is being tendered freely and voluntarily and is not being submitted as a result of coercion or duress of any kind whatsoever.
2. That, except as to the effective date, this resignation is being tendered unconditionally.
3. That I understand and agree that this resignation may not be withdrawn once it has been accepted by the Human Resources Department and my employment with the City of Tuscaloosa shall automatically terminate on the effective date indicated herein.
4. That the Human Resources Department, after acceptance of this resignation, may proceed to fill the vacancy created by this resignation prior to its effective date and I will make no claim or assert any right, title and/or interest to said position, nor seek to withdraw this resignation.
5. That during the pendency of this resignation prior to the effective date hereof, I remain a City employee and as such am subject to all applicable rules, regulations and policies.

RETIREMENT: Yes _____ No _____

That if indicated, I am also electing, in conjunction with but not as a condition of this resignation, to give notice to the City and express my intention to make separate application with the appropriate entity for applicable retirement benefits to which I may otherwise be entitled as a result of my employment with the City.

The effective date of my retirement from the City shall be the same as stated herein although the effective date of retirement with the appropriate entity from which I am to receive benefits may differ. I understand that the nature and extent of retirement

benefits, if any, are to be determined by the terms and conditions of the particular retirement program in which I have participated.

EFFECTIVE DATE:

1. The date upon which this resignation is to be effective shall be the end of the regular work day or shift on the _____, day of _____, 20____, which will be the last day I am otherwise required by the terms and conditions of my employment with the City to render services and from and after which date my employment and all benefits of employment (not retirement) shall cease.

2. I understand that with the exception of the effective date as it relates to City policies nothing herein contained impairs the usage of benefits of employment which I have already accrued and which may be utilized pursuant to the applicable policies and procedures of the City prior to the effective date of the resignation. However, I further understand that from and after the effective date, no further benefits will accrue to me, and any benefits not otherwise payable to me pursuant to applicable City policy shall be forfeited.

DONE this the _____ day of _____, 20_____.

WITNESSES:

BY: _____
(Signature)

(Print Name)

ACKNOWLEDGED:

Department Head

UNCONDITIONAL ACCEPTANCE

This resignation from employment with the City of Tuscaloosa is hereby accepted unconditionally on the _____ day of _____, 20_____.

BY: _____
Director, Human Resources Department