

EESLPD SEPARATION OF EMPLOYMENT

Early Childhood Education Lead Teachers – Nonpublic Schools

REQUIRED FIELDS

Teacher's First Name	Middle Name	Maiden Name	Last Name
Home Phone Number	Cell Phone Number	Email Address	
- -	- -	@	
Site Name		Site Phone Number	
		- -	
Site Physical Address		City	State
			NC
Site Administrator / Director Name		Email	Date of Separation
		@	
Reason for Separation			
<input type="checkbox"/> To teach in another NC Public School System <input type="checkbox"/> To teach in a NC Charter School <input type="checkbox"/> To teach in another state <input type="checkbox"/> To continue education/take a sabbatical <input type="checkbox"/> Family relocation <input type="checkbox"/> Moving due to military orders <input type="checkbox"/> Moved to a non-teaching position in LEA <input type="checkbox"/> Moved to a non-teaching position in another LEA		<input type="checkbox"/> Career Change <input type="checkbox"/> Re-employed retiree resigned <input type="checkbox"/> Retired with full benefits <input type="checkbox"/> Dismissed <input type="checkbox"/> Family responsibility/childcare <input type="checkbox"/> Dissatisfied with teaching <input type="checkbox"/> Health/Disability <input type="checkbox"/> Deceased <input type="checkbox"/> Other	

This form must be completed, signed and dated by the applicant or site administrator. I attest to the accuracy of the above information.

 Signature

 Date

**** In order to continuously protect your personal identification, the Early Educator Support Licensure and Professional Development (EESLPD) Unit will ONLY accept this application form via fax or postal mail.**

Mailing Address: Attn: EESLPD Enrollment Specialist, 2201 Mail Service Center, Raleigh, NC 27699-2200

Fax Number: (919) 715-0920

Applicants should retain a copy of this form.