

# Bastrop ISD – Human Resources

## SUBSTITUTE RESGINATION

Date \_\_\_\_\_

Substitute's Name \_\_\_\_\_

Reason for resigning: \_\_\_\_\_

\_\_\_\_\_

Effective date: \_\_\_\_\_

Would you like to leave a forwarding address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

You may return this form any of the following ways:

Fax: (512) 308-9501

Email: [dgreene@bisdtx.org](mailto:dgreene@bisdtx.org)

Mail: 906 Farm Street

Bastrop, TX 78602