CAL POLY

# STAFF/MPP NOTICE OF RESIGNATION HR 191 FORM

**Instructions – For Staff/MPP Employees Resigning from Cal Poly Employment:**

- **Employee:**
  1. Must complete and give the HR Form 191 to the supervisor at the time notice of resignation is given.
  2. Must complete the Payroll Form 300 (PR 300) for various property and account clearances by the last day physically worked.
  3. Must contact your Payroll Technician immediately.
  4. Complete your exit interview with ExitRight. Cal Poly has contracted with ExitRight to conduct employee exit interviews. In the next few days, you will receive an email from exitright@hsdmetrics.com to complete an online survey. Responses are confidential and will not impact any future employment with Cal Poly.

- **Department**:
  1. Obtain required signatures on the HR Form 191 and forward it to Human Resources immediately.
  2. Review and approve the Payroll Form 300 (PR 300) and forward it to Payroll Services immediately.

HR Form 191 is NOT required for:

- Temporary employees whose temporary appointment is ending. ** PR 300 still required **
- Retiring employees: If retiring from Cal Poly, contact Human Resources to apply for retirement. ** PR 300 still required **
- Faculty: A letter of resignation is required for faculty employees. ** PR 300 still required**

| EMPLOYEE NAME: | EMPLOYEE ID: | LOCATION: |
|---|---|---|
| CSU CLASSIFICATION TITLE: | DIVISION: | DEPARTMENT: |

| REASON FOR RESIGNATION: | RESIGNATION EFFECTIVE DATE (last day of employment/pay status): | |
|---|---|---|
| ☐ New position provides professional advancement<br>☐ New position provides better salary<br>☐ New position has better working conditions<br>☐ Dissatisfied with CSU (policies, administration, support)<br>☐ Dissatisfied with CSU promotional opportunities<br>☐ Personal reasons<br>☐ Other | LAST DAY PHYSICALLY WORKED: | |
| | SUPERVISOR'S NAME: | SUPERVISOR'S EXTENSION: |
| | COMMENTS: | |

| EMPLOYEE SIGNATURE (REQUIRED) | DATE |
|---|---|
| | |

| DEPARTMENT HEAD/CHAIR/DIRECTOR ACKNOWLEDGEMENT (REQUIRED) | | | |
|---|---|---|---|
| PRINT NAME: | TITLE: | SIGNATURE: | DATE: |
| | | | |
| **DEAN/DIVISION HEAD ACKNOWLEDGEMENT** | | | |
| PRINT NAME: | TITLE: | SIGNATURE: | DATE: |
| | | | |

**FOR HUMAN RESOURCES USE ONLY**

| DATE RECEIVED: | DATE PROCESSED: | COMPLETED BY: |
|---|---|---|
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