



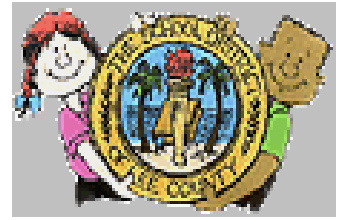
(LEAVE MANAGEMENT SYSTEM)

SCHOOL DISTRICT OF LEE COUNTY

Christine Blanchard, Payroll Specialist/LMS (335-1445 – 6:30am through 2:00pm)

LMS Service Center c/o Payroll Department

2855 Colonial Boulevard, Ft Myers, FL 33966



NOTICE OF INTENT

Your services are valued greatly. Thank you for the services provided during the past school year. We look forward to working with you again in the coming year. If you have any questions regarding this communication, please call the number indicated above between the hours of operation.

SECTION I - INTENT TO RETURN 2022-2023

If you intend to continue providing guest teacher services during the coming year 2022– 2023, you do not need to return this letter.

Important Note:

To remain on our active Guest Teacher list for the 2023-2024 school year you must perform Guest Teacher services for a minimum of 10 days during the 2022-2023 school year.

The system's callout hours will continue as follows: 5:00 am to 12:00pm for current day jobs, and 6:00pm to 10:00pm for future day jobs.

SECTION II - DO NOT INTEND TO RETURN 2022-2023

If you do not intend to continue providing guest teacher services, please return this completed section to the address indicated above. Thank you.

I _____, will not continue to provide guest teacher services
(Print your full name)
in the coming year. Please end my guest teacher position with The Lee County School District as of today
_____/_____/_____. I understand that my name will be deleted from the guest teacher list.

(Employee ID#)

(Your signature)

_____/_____/_____
(Date)

Please select one of the following ending employment action reasons:

- I have accepted a job at _____ within the Lee County School District.
- I have accepted employment in Education **within** the state of Florida.
- I have accepted employment in Education **outside** the state of Florida.
- I have accepted employment in a **Non-Education** program.
- I am moving out of the area.
- Other: _____

PLEASE MAINTAIN YOUR ADDRESS CURRENT IN ORDER TO RECEIVE YOUR W-2 FORM AT THE CORRECT ADDRESS.

If you would like to withdraw your FICA ALT contributions, please contact Human Resources or Bencor for a claims form (Human Resources: 239-337-8569, Bencor: 1-866-296-9712). **Please note:** Funds may only be withdrawn upon termination.