

[Replace this text with today's date]

Dear Superintendent,

I am requesting of the Marshall County Board of Education that I be allowed to resign my position as [Replace this text with your position title] at [Replace this text with your school or work location].

The effective date of resignation is [Replace this text with your resignation month, date, and year].

Sincerely,

[Original Signature required]
[Print or type your name here]