

RESCIND OF RESIGNATION REQUEST FORM

DATE: _____

TO: Department of Administrative Services
Statewide Human Resources Management
165 Capitol Avenue – Room 404
Hartford, CT 06106

FROM:

Print Full Name

Social Security #: _____ - _____ - _____

Mailing Address (include Apt. #)

Employee ID #: _____

City, State, Zip Code

Effective date of Resignation: ____ / ____ / ____
MM DD YY

Former Name, if any

Last Employing Agency (do not abbreviate)

Effective today, I wish to rescind my resignation from an Executive Branch agency in State of Connecticut ("State") service. I understand as a permanent, classified employee, I am allowed to take this action provided I do so within one year from the date of my resignation in good standing. I also understand I am eligible to return to State service in any class(es) in which I had previously attained permanent status without examination as long as I am rehired into this classification within two years from the effective date of my resignation.

I further understand:

- General Letter No. 177 (found on-line at www.das.state.ct.us - Human Resources page - Business Rules and Regulations Section – General Letters) discusses the Rescind of Resignation Procedure and authorizes the assignment of certain privileges provided I am rehired within prescribed timeframes and provided I meet established criteria for receiving such privileges.
- I must have been a permanent, classified employee in State service at the time of my resignation from an Executive Branch agency in order to rescind my resignation.
- I must have resigned in good standing in order to rescind my resignation.
- I must have resigned within one year from the date of this request in order to rescind my resignation.
- My name will **not** appear on any Reinstatement or SEBAC list(s) as only laid-off State employees are eligible for this benefit. Therefore, I understand the State of Connecticut is **not** obligated to notify me of openings in positions for which I qualify under this procedure nor is the State of Connecticut under any obligation to rehire me.
- If the requirements for position(s) in which I had previously attained permanent status have changed, I must meet the new training and experience requirements as outlined on the (current) job description(s) in order to qualify for position(s) in the(se) classification(s).
- The DAS-Statewide HR Management will review the information I have provided above and approve or deny this request accordingly.
- DAS-Statewide HR Management will notify me of the status of my request via First Class Mail.
- Privileges under General Letter No. 177 are applied at the time of reinstatement to a permanent State of Connecticut position and are not extended to any future appointments.

Signed:

Signature of Former State of CT Employee