City of Manitowoc

Intent to Retire Form

to be completed for every retiring/resigning employee of the City of Manitowoc

*please submit to Mayor Nickels' Office 30 Days Prior to retirement/resignation

THIS INFORMATION WILL REMAIN CONFIDENTIAL



Name of Employee:	Sarah C Hoppe
Depositors of	Community Dayslanment Department
Department:	Community Development Department
Area in Department:	Assessor
Original Hire Date: ex: 01/01/2000	
ex. 01/01/2000	
Retirement::	
Resignation:	
Final Day of Employment:	01/15/2016 Last Day
	of Work:
Department Head/Manager	
Completing this Form:	
Date Completed:	
If your Department is hosting	g a farewell reception and you would like Mayor Nickels to attend
-	Merit please indicate; date, time, location. *note: All Department
	esignations will have a reception in the Mayor's Office.
Date of Passetians	
Date of Reception:	
Time of Reception:	
ex: 11:00am - 1:00pm	
Requested Time for Mayor	
Nickels to Attend:	
Location and Room:	

Brief History of Employee's Employment with the City of Manitowoc.

Please include:

All departments they were in and correlating years

Titles of positions held

Special recognitions/awards over the years

Personal perspective of employee/their career

Co-workers perspective of employee/their career

News articles

Any other pertinent information you deem is appropriate