

**Lewiston School Department  
Teacher Intent to Retire  
Deadline: October 1**

Dear Superintendent,

Pursuant to Article XIX, Sick Leave, Section E of the Agreement between the Lewiston School Committee and the Lewiston Education Association, I wish to inform you that there is a possibility that I may be retiring from my position as an educator with the Lewiston School Department after the current school year.

Sincerely,

Name: \_\_\_\_\_

School: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_