

EMPLOYEE NUMBER:

Name: _____ Date: _____

Please accept my voluntary resignation effective _____.
(Date)

Reason for Resignation: _____

Employee Signature: _____

Manager's Signature: _____

EMPLOYEE NUMBER:

Name: _____ Date: _____

Please accept my voluntary resignation effective _____.
(Date)

Reason for Resignation: _____

Employee Signature: _____

Manager's Signature: _____