



Notice of Voluntary Resignation

Completed by Employee:

Company Name: _____
Employee Name: _____
Requested Final Day: _____

Today's Date: _____
Employee ID #: _____

Employee Contact Information:

Phone: _____
Email Address: _____
Forwarding Address:

_____		_____
Street Address		Apt. #
_____		_____
City	State	Zip Code

Resignation Statement:

Please accept my voluntary resignation from employment with this Company effective on the date I have indicated above (or the date acceptable to the Company by mutual agreement).

Reason for resigning:

- New Employment
- Other

Please explain: _____

Completed by Supervisor

Resignation date acceptable to the company?

- Yes
- No

If "No", proposed resignation date: _____

Supervisor or management comments: _____

Acknowledgment:

Employee Signature: _____
Management Signature: _____

Date: _____
Date: _____