



EMPLOYEE RESIGNATION

WORKSITE NAME: _____

EMPLOYEE NAME: _____

DEPARTMENT: _____

DATE AND TIME: _____

I hereby submit my resignation effective: _____

I wish to make clear that I have no claims or grounds for any claims against my employer based on my time of employment with the Company.

I certify that I have not removed from company property any business information including, but not limited to, customer lists and information, computer reports, etc. except as noted below where I have acknowledged the item(s) to be returned timely.

REASON FOR LEAVING: _____

EMPLOYEE SIGNATURE

DATE