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| **Resignation Request Form** | | | | | |
| **Date**\*： | | | | | |
| **Requester\*** |  | Department **\*** | |  | |
| **Employment Date\*** |  | Expected Last Working Day **\*** | |  | |
| Reason for Resignation **\*** |  | | | | |
| Contact Information After Resignation **\*** |  | | | | |
| Remarks |  | | | | |
| Resignation Procedures | | | | | |
| Inter-Department  Signing | Items to Hand Over | | Explanation | | Undisbursed Deductions |
| General Affairs |  | |  | |  |
| Finance |  | |  | |  |
| Main Department |  | |  | |  |
| Actual Resignation Date |  | | | | |