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| **Resignation Request Form** | | | |
| **Date\*：** | | | |
| **Requester\*** |  | **Department\*** |  |
| **Resignation Reason\*** |  | | |
| **Expected Resignation Date\*** |  | | |
| **Contact Information after resignation** | | | |
| **Home phone\*** |  | **Mobile Phone\*** |  |
| **Email\*** |  | | |
| **Address\*** |  | | |
| **Remark** |  | | |