

ABC Company	Request for Resignation	Confidential
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Name		Department	
Title/Position		Employee No.	
Employment Start Date		Resident No.	
Address	Present		
	After		

I, the person listed above, will resign from the company on ____/____/____ and keep the following pledge.

Applicant

Name

Signature

Date

1. I will be sure to hand over my duties to my successor, repay the debts that I owe to the Company, return any Company money and documents that I take care of, and work to the best of my ability until the date of resignation.
2. I will observe Company rules regarding resignation and keep any Company secrets that I have gained knowledge of during the course of carrying out my duties.
3. If the resignation process is delayed for reasons that are my fault, I may receive severance allowance, wages, or other goods late. As long as payment is within payment date limitations which were agreed upon between the Company and me, I will not make any claims against the Company.
4. If I violate the above matters, I will have civil/penal responsibilities and the obligation to compensate for any damages.

Reason for Resignation

- | | |
|--|--|
| <input type="checkbox"/> Change of Occupation | <input type="checkbox"/> Personal Business |
| <input type="checkbox"/> Marriage | <input type="checkbox"/> Illness |
| <input type="checkbox"/> Schoolwork | <input type="checkbox"/> Succession of Family Business |
| <input type="checkbox"/> Lack of Aptitude | <input type="checkbox"/> Future Prospects |
| <input type="checkbox"/> Dissatisfaction with Salary | <input type="checkbox"/> Dissatisfaction with Superior |
| <input type="checkbox"/> Resignation under Instruction | <input type="checkbox"/> Personal Matter |
| <input type="checkbox"/> Other Reasons () | |