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| **RESIGNATION FORM** | | | | | | | |
| **Employee No:** | |  | | **Employee Name:** | |  | |
| **Department/Contract:** | |  | | **Position:** | |  | |
| **Resignation Effective Date:** *(last day of employment / notice period end date)* | | | | (dd/mm/yy) | | | |
| Reasons: | | | | | | | |
| **Employee Signature:** |  | | | | **Date:** |  | |
| **Line Manager:** | | | | | | | |
| Resignation submitted on: | | (dd/mm/yy) | | | Employee interviewed on: | | (dd/mm/yy) |
| Correct notice period given: | | YES | NO | | *If NO then a separate submission is to be forwarded to CAO for approval* | | |
| Comments: | | | | | | | |
| **Signed:** |  | | | | **Date:** |  | |
| **Name:** |  | | | | **Position:** |  | |
| **HR Approval:** | | | | | | | |
| **Head of HR and Emiratization/**  **Deputy Director of Business Support Services Sector** | | | | | | | *Date:* |
| **HR Action:** | | | | | | | |
| Recruitment advised for replacement action: | | | | | *Initials:* | | *Date:* |
| HR Team advised for action as required: | | | | |  | |  |
| Resignation Acceptance Notice sent to Employee: | | | | |  | |  |
| HRF531 Employment Clearance prepared | | | | |  | |  |
| Termination action completed: | | | | |  | |  |
| File: Personal File | | | | | | | |
| **Notes/Remarks:** | | | | | | | |