

Acceptance of Verbal or Written Resignation

(COPY TO AGENCY LETTERHEAD)

Date

Name

Address

City, State, Zip Code

Dear Mr./Ms. (Last Name):

This letter confirms your (verbal/written) resignation from the Department of (agency name), effective (date) at (time).

Please return all State property immediately.

Sincerely,

(Name of Approving Authority)

(Title of Approving Authority)

c: Employee Personnel File
Agency Chief Human Resources Officer