

## EMPLOYEE LETTER OF RESIGNATION

Date:			
Employee:		Employee #:	
Division:		Supervisor:	
I,(Employee Nan		decided to resign my position at th	ne City of Memphis.
any company agent or represe	ntative that have ge that I have re ent.	ny complaints against my supervise not been otherwise reported in was ported in writing any and all injure	riting during my
	will cease accord	vided within the time required by a ing to company policy and applica nail.	
I acknowledge that I sign t	his resignatio	n willfully and voluntarily.	
Employee Printed Name		Supervisor Printed Name	
Employee Signature	 	Supervisor Signature	