

# Request for Resignation

Name \_\_\_\_\_ Member No \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No: \_\_\_\_\_ Alt No: \_\_\_\_\_

Reason for Request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Request: \_\_\_\_\_ Date Effective: \_\_\_\_\_

Signature \_\_\_\_\_

<p><u>Office Use Only:</u></p> <p>Approved By: _____</p> <p>Date of Computer Change: _____</p> <p>Initials: _____</p>
---