

# Executive Resignation Notice Form

Please complete this form to formally notify your decision to resign. This will help ensure a clear and respectful transition process.

**Full Name:**

Enter your full name

**Current Position/Title:**

Your executive title

**Department:**

Department name

**Notice Submission Date:****Proposed Last Working Day:****Notice Period:**

e.g., 30 days

**Reason for Resignation (optional):**

Briefly state your reason (if desired)

**Transition Plan & Handover Suggestions:**

Outline your recommended transition plan and key handover notes

**Additional Remarks (optional):**

Any additional comments or recommendations

**Signature:**

Type your name

**Date Signed:**

Submit Resignation

