

EMPLOYEE RESIGNATION FORM

NAME OF EMPLOYEE: _____

DATE OF COMPLETING FORM: _____

EMPLOYEE'S SOCIAL SECURITY NUMBER: _____

I am (CHECK ONE):

voluntarily resigning my position at Kumon Math and Reading

voluntarily requesting to work less hours

effective from (DATE) _____.

The reason for this is _____

_____.

I understand that the Company does not have to allow me to work until my requested last day and can accept my resignation immediately or at any time hereafter if the Company so chooses.

Employee Signature: _____ Date: _____