

Resignation Form

SECTION I – TO BE COMPLETED BY THE EMPLOYEE

Name _____ Position _____

Affiliation: _____

Final salary (with allowance): _____ Baht per month

Effective date of resignation: _____

Reason for leaving: _____

The university properties under possession:

1. _____
2. _____
3. _____
4. _____
5. _____

I will return the university's properties under my possession within _____

I certify that this resignation is executed by voluntarily and my own free will

_____ Date _____

Employee's Signature

SECTION II – TO BE COMPLETED BY THE SUPERVISOR/ DEAN

Consideration of the Supervisor/ Dean:

- Approve Disapprove
- Postpone until _____ (with reasons)
- Others (with reasons)

Reasons: _____

_____ Date _____

Supervisor/ Dean's Signature

Resignation Procedures

1. *Submit the original resignation to the supervisor/dean 30 days prior to the last working day*
2. *The resignation can be restrained by a maximum of 90 days by the approver*
3. *Contact the Division of Human Resources Management immediately to return health insurance card and other university's properties (if applicable)*