Voluntary Resignation Confirmation Form

Employee Information

Employee Name: _____

Employee ID (if known): _____

Location/Site: _____

Position/Title: _____

Manager Name: _____

Resignation Details

Date Notice Provided: _____

Last Day Worked or Intended Final Day: _____

Statement of Voluntary Resignation

I voluntarily resign my employment with WhiteWater Express Carwash of my own choice. This separation is not initiated by the company. I understand that my final pay will be processed according to company policy and applicable law.

Signatures

Employee Signature: _____ Date: _____

If employee declines to sign, manager must complete below:

Manager Attestation: I confirm the employee verbally communicated their voluntary resignation to me on _____ (date/time) and declined to provide written confirmation.

Manager Signature: _____ Date: _____

Witness/HR (optional): _____ Date: _____

Return completed form to: hr@whitewatercw.com