

**This is an example of a SAMPLE LETTER OF
RESIGNATION/QUIT ACCEPTANCE
EMPLOYMENT: REGULAR FULL-TIME EMPLOYEE
for supervisors to use as a reference. There is a fillable letter below that can be
printed on CMH letterhead for supervisors use.
To USE the fillable form below, click in each field twice at the beginning
of the field then just tab through the document.**

(Date)

(Employee Name)
(Address)
(City, State, Zip Code)

Dear (First Name):

This is to acknowledge your letter of resignation dated _____, with your last day of employment being _____.

Please review the attached CMH Policy 06-001-0115, Resignation/Retirement/Termination Process. The policy gives you detailed information regarding access to retirement monies, your final paycheck, and insurance options under COBRA (if applicable). However, if applicable, please note that you will be notified by our benefits management company regarding your rights under the COBRA Act of 1985.

You will also need to set up an appointment with me, so we can complete your final evaluation. You will be contacted by the Human Resource Manager to schedule your exit interview.

(Employee Name), you have been a great asset to our organization since your employment, which started in _____. I want to personally thank you for all you have done for all the individuals with which you had contact. I wish you continued success in pursuing your future goals.

Sincerely,

Supervisor's Name
Program Name

cc: Chief Executive Officer
Chief Operating Officer
Chief Financial Officer
Chief Clinical Officer
IT Director
Support Services Director
Human Resources Director
Personnel Secretary
Payroll Clerk
Union President Chairperson (as applicable)
Personnel File

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