



## RESIGNATION AND ACCEPTANCE FORM

This form is only used for employees leaving the employment of the GNWT, if an employee is transferring to another GNWT department or GNWT agency, this form is not to be completed.

[Review "Leaving the GNWT" on MyHR prior to completing Form](#)

### EMPLOYEE SECTION

Name	_____	Supervisor Name	_____
Employee ID/Record	_____	Department	_____
Last day of Employment (last date of work including leave)	_____	Position Title	_____

**Will you be on leave prior to your resignation date? If so, please indicate the type of leave and dates.**

**Leave Type:**

**Dates:**

All timesheet entries completed (including vacation) in HRIS

All time must be entered and submitted in HRIS prior to signing form

Employee Comments

### SUPERVISOR SECTION

All timesheet entries approved in HRIS (All Leave up to Last Day that is approved)

Has it been 48 hours since the notice was received?

Additional Information

*It is the Supervisor/Managers responsibility to ensure all items have been complete. Failure to complete the above section may result in an overpayment and recovery to the employee.*

Employee Signature	_____	DATE	_____
<i>Employee has 48 Hours to rescind resignation - supervisors cannot accept the resignation or sign this form until 48 hours has passed</i>			DD-MMM-YYYY

Supervisor Signature	_____	DATE	_____
			DD-MMM-YYYY

Deputy Head or Delegate Signature	_____	DATE	_____
			DD-MMM-YYYY

Received by Human Resources	_____	DATE	_____
			DD-MMM-YYYY

**COMPLETED DOCUMENTS ARE SENT TO YOUR HUMAN RESOURCE REPRESENTATIVE FOR PROCESSING  
LATE SUBMISSION OF THIS FORM MAY RESULT IN OVERPAYMENT**