



WICHITA STATE
UNIVERSITY

Letter of Resignation

Revised: 06/2010

Date: _____

myWSU ID#: _____

I, _____, resign from my position as
Employee's Name

_____ effective _____
Position Title Date

Reason for resignation:

Mail original to OHR, Campus Box #15, for employee's personnel file and submit copy to your immediate supervisor.

Employee's Signature

Date