

**COLORADO DEPARTMENT OF TRANSPORTATION
NOTICE OF RESIGNATION**

A notice of resignation must be submitted to the supervisor and/or appointing authority no later than fourteen (14) days prior to the effective date of the resignation, unless the employee and appointing authority agree to less time. Failure to provide a written notice, as required by CRS §24-50-126(1), may result in a delay in payout of leave and forfeiture of reinstatement privileges.

Employee Name	Personnel Number
Supervisor Name	Supervisor Class Title
I hereby voluntarily resign from my position with CDOT effective at the close of business on...	Last Date of Employment
My last date physically working on the job was/will be...	Last Date Worked (attendance)
Reason for Resignation	
Is this a voluntary resignation in lieu of disciplinary action? <i>i.e. Were you offered the chance to resign to avoid a disciplinary termination?</i>	Yes No
Do you currently have an open workers' compensation claim?	Yes No
<p>Unemployment Insurance benefits are available to all unemployed workers who meet the eligibility requirements of Colorado Law.</p> <ul style="list-style-type: none"> To file a claim: Visit Colorado Department Labor and Employment's (CDLE) website https://cdle.colorado.gov/unemployment/file-a-claim or call CDLE at 303-318-8000 and register for a MyUI+ account: https://cdle.colorado.gov/myui-plus. In order to file a claim, you will need the following information: Full legal name, Social Security Number, and proof you are authorized to work in the United States, such as a driver's license or State issued identification. To inquire about the status of your claim: For further information refer to the CDLE website at: https://cdle.colorado.gov/unemployment; or log on to MyUI+: https://cdle.colorado.gov/myui-plus; or call CDLE at 303-318-8000. 	
<p>I understand that CRS 24-18-201 states: former employee may not, within six months following the termination of his <i>[sic]</i> employment, contract or be employed by an employer who contracts with a state agency or any local government involving matters with which he <i>[sic]</i> was directly involved during his <i>[sic]</i> employment. For more information refer to the Statute.</p>	
Signature of Employee	Date
Signature of Appointing Authority	Date

Please complete [CDOT's Exit Survey](#). You may find the link on the Employee Hub's HR website at the bottom of the page, in the "Leaving CDOT" section. <https://sites.google.com/state.co.us/cdothub/teams/human-resources>

Email completed form to dot_hq_pcr@state.co.us.
cc: Regional File, Employee