

[Date]

[Employee Name]

[Employee Address]

[City, State, Zip Code]

Dear [Employee Name],

Subject: Acceptance of Resignation - Immediate Effect

This letter is to formally acknowledge and accept your resignation from your position as [Job Title], effective immediately, [Date].

We have received your notice regarding your current medical hardship. Please be assured that we understand the severity of your situation and respect your need to prioritize your health and well-being at this time. We accept your resignation with immediate effect as requested.

Regarding your final arrangements:

- Your final paycheck, including any accrued benefits, will be processed by [Date].
- Information regarding the status of your health insurance and COBRA options will be sent to you via [Mail/Email].
- Please arrange for the return of any company property (laptop, keys, ID badge) by [Date/Method].

We thank you for your contributions to [Company Name] and wish you a full and speedy recovery. Our thoughts are with you during this difficult time.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title]

[Company Name]