



ASBTC

Associated Students of Bellingham Technical College

Striving for Student Success

Contact: asbtc@btc.ctc.edu | 360.752.8357 | Campus Center (CC) Room 300

Resignation Form

Representative Details:

Senator

Alternate

Program: _____ Quarter: _____

Name: _____ Student ID: _____

Start Date: _____ Date of Resignation: _____

Reason/s for leaving:

Signature: _____ Date: _____

For Office use only:

Received by ASBTC: _____ Date: _____

Received by HR: _____ Date: _____

Please Note:

- Senator who resigns anytime during the quarter will not receive stipend.
- This form must be submitted two weeks prior to the resignation.
- The resignee is responsible for appointing his/her replacement within the two weeks' notice period.