


Name: Muhammad Khan
Designation: UCPO
Program: Polio Eradication Initiative
Duty Station: Kolala 1
Last Working Day: 09/04/2019

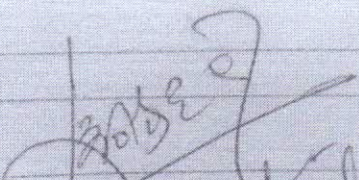
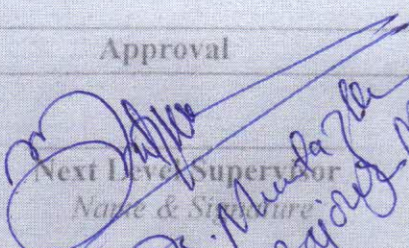
To: Dr. Walid Hassan
Designation: PEO
Subject: Resignation
Date: 09/04/2019

Respected Sir,

Due to my personal engagement I can't continue my job of union council polio officer.

Kindly accept my resignation.

9/4/2019 
Signature

Approval		
 First Level Supervisor Name & Signature	 Next Level Supervisor Name & Signature	TL Approval
Dr. Wajid P30-BAYOUK 09 th APRIL 2019	Dr. Mustafa A.C. (A.I) Bayouk Mohamed 10/04/19	