



**Offshore Gaming Employment License (OGEL)  
RESIGNATION / TERMINATION FORM (*Form B*)**

**Page No.**

Page 1 of 1

**Form No.**

OGLD - 1175

**Rev. No.**

4

**Effectivity**

October 17, 2023

***Name of Company***

***Business Address:***

| NAME | NATIONALITY | POSITION | OGEL NUMBER | REASON FOR TERMINATION | EFFECTIVITY DATE |
|------|-------------|----------|-------------|------------------------|------------------|
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |
|      |             |          |             |                        |                  |

***Prepared by:***  
***(To be filled up by the Authorized Representative)***

|                                                       |             |
|-------------------------------------------------------|-------------|
| <b>NAME</b><br><i>(Please Sign over Printed Name)</i> | <b>DATE</b> |
|-------------------------------------------------------|-------------|