

Employment Authorization Cancellation Notice

Date:

To:

Address:

Subject: Cancellation of Employment Authorization

Dear

This notice is to inform you that your Employment Authorization, previously granted under reference number

, has been cancelled as of

The reasons for this cancellation are as follows:

Please discontinue all employment activities effective immediately. If you have any questions regarding this notice or wish to appeal this decision, please contact the Human Resources department.

Sincerely,

(Authorized Personnel)