**Tainan City Government Labor Affairs Bureau**

**Application for Withdrawal of Labor Disputes Mediation**

The applicant of this case\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ applied for a mediation with \_\_\_\_\_\_\_\_\_\_\_\_\_ (the name of the company or the employer) on\_\_\_\_\_\_\_\_\_\_\_\_(yy/mm/dd).

In that

□ both sides reached an agreement on \_\_\_\_\_\_\_(yy/mm/dd)

□ the applicant gives up the mediation

□ the applicant will seek other ways to solve the problem,

the applicant would like to withdraw this mediation.

Sincerely,

Tainan City Government

Applicant: (Sign)

Phone Number:

Address:

Date (R.O.C): (yy/mm/dd)