

SUNY CORTLAND PHASED RETIREMENT PROGRAM APPLICATION

1. Participation:

I elect to participate in the Phased Retirement Program beginning

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date). I select the following option (choose one):

* Option 1 - Remain an active employee and enter in the phased retirement with a future retirement date identified

Retirement date will be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(latest date possible is three years after phased retirement start date)

* Option 2 – Retire and enter into the phased retirement program as a retiree

 Retirement date will be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(latest date possible is three years after phased retirement start date)

1. Obligation:

I select the following obligation:

Year One (check one): □ 25% □ 50%

Year Two (check one): □ 25% □ 50% □ to be determined

* not applicable

Year Three (check one): □ 25% □ 50% □ to be determined

* not applicable
1. Proposed assignment and work schedule are attached to this application (subject to approval).
2. Signature: By my signature below, I agree to retire on or before the date identified in Section I above. I understand I will be issued a contract outlining the new terms of employment and that this contract is irrevocable except that I can terminate employment earlier than originally expected. My participation in this program will be finalized when I sign the contract and return it with an irrevocable resignation for the purpose of retirement.

(Employee Signature) (Date)

V. Approvals (signatures denote approval of application):

|  |  |
| --- | --- |
| (Chair/Supervisor Signature) | (Date) |
| (Dean/Director Signature) | (Date) |
| (Next Level Supervisor Signature) | (Date) |
| (Vice President Signature) | (Date) |

(after Vice President’s approval, send copy to employee and forward original form to Human Resources)