

Phased Retirement Proposal

Employee Name \_\_\_\_\_

Effective Date of Phased Retirement \_\_\_\_\_

Title \_\_\_\_\_ Department \_\_\_\_\_

Initial Phased percentage of FTE \_\_\_\_\_

Subsequent reduction in FTE by year (if any) \_\_\_\_\_

Description of services to be performed during the term of Phased Retirement:

\_\_\_\_\_  
Employee Signature Date

Approvals:

\_\_\_\_\_  
Chair/Supervisor Date

\_\_\_\_\_  
Dean/Director/Asst. Vice President Date

\_\_\_\_\_  
Provost/Vice President Date

\_\_\_\_\_  
Asst. Vice President, Human Resources Date

\_\_\_\_\_  
President Date

Please forward to Human Resources.