



Eligible Faculty Member Identification Section

PeopleSoft Employee ID#	Faculty Member Last Name	Faculty Member First Name	Middle Initial/Name	Date of Submission
Name of School/College and Division		Name of Department		
Faculty Rank and/or Administrative Title		Other		

Faculty Phased Retirement Program Plan

Please indicate the percent % of full-time status you propose to provide in each of the next five years

Work Load Percent of Time: Your percent of time may remain constant or decrease year by year during the phased out period. Allowed Values are: (100%, 75%, 50%, 25%, 0%)					
	AY 2012 - 2013	AY 2013 - 2014	AY 2014 - 2015	AY 2015 - 2016	AY 2016 - 2017

Phased Retirement Program Submission/Receipt

My signature on this document indicates that I am requesting to participate in the Phased Retirement Program. Note that my status will not change unless I subsequently sign a *Faculty Phased Retirement Agreement*.

Eligible Faculty Member Name <i>(Please print/type name.)</i>	Signature	Date
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My signature indicates that I acknowledge receipt of the faculty member submission of the application to participate in the PRP

Dean <i>(Please print/type name.)</i>	Signature	Date
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Faculty Phased Retirement Program – Requested Duties by Year

Please describe the work and responsibilities you propose to complete in each year of your participation in the Phased Retirement Program.
 Add as many pages as required to describe your request.
(Please refer to the instructions and the sample applications available).

Please note that during your phase-out period, the University may substitute different work of comparable time commitment as specified in your negotiated agreement.

Faculty Member Identification:

Faculty Phased Retirement Program – Requested Duties by Year *continued*

Add as many pages as required to describe your request.
(Please refer to the instructions and the sample applications available).

Please note that during your phase-out period, the University may substitute different work of comparable time commitment as specified in your negotiated agreement.

Faculty Member Identification:

Faculty Phased Retirement Program – Requested Duties by Year *continued*

Add as many pages as required to describe your request.
(Please refer to the instructions and the sample applications available).

Please note that during your phase-out period, the University may substitute different work of comparable time commitment as specified in your negotiated agreement.