



APPLICATION FOR PHASED RETIREMENT PROGRAM

Applicants for phased retirement must complete the following form and secure appropriate signatures up through the Dean level, then submit the form to Academic Affairs. All forms must have all signatures regardless of approval or disapproval at any level. If the application is not approved at the final stage, the applicant has the right to appeal to a review committee. Contact the Office of Human Resources for appeal procedures. Applications must be initiated at least one semester in advance of the proposed start date for phased retirement.

The minimum workload required in order to participate in phased retirement and thus retain benefits is 53%.

Name Rank/Title

Date of Birth Department

Home Address MU ID#

Years-to-date of continuous full-time service at Marshall University

Additional years of full-time WV state service

Salary Worksheet		
Current Salary	\$	
Proposed date to begin phased retirement (month/day/year)		
Projected date to begin full retirement (month/day/year)		
For each year of planned participation in the Phased Retirement Program, indicate the proposed proportion of full-time workload and salary below:		
Academic year or individual semester	Proportion of full-time workload	Proportion of full-time salary
<i>Example: AY 2019-2020</i>	<i>Example: 75%</i>	<i>Example: \$44,250 (based on current salary of \$59,000)</i>
<i>Example: Fall 2020 only</i>	<i>Example: 53%</i>	<i>Example: \$31,270</i>

Complete a specific workload plan for each phase of your Phased Retirement. (Most plans include only one phase.) Plans should be developed in consultation with the supervisor/chairperson, dean or director. Attach additional pages as necessary.

Workload Plan

For Phase One, enter a workload percentage of full-time (between 53% and 75%)			
Inclusive dates of Phase One of phased retirement			
	Describe specific duties and responsibilities in your current FT load	How will your duties/responsibilities be reduced during Phase One?	How will other responsibilities be reassigned during Phase One?
Course Load			
Advising			
Research			
Committees/Service			
If applicable (only for administrators):			
Supervision			
Budget			

	Name and Date	Signature	Approval
Applicant			
Chair/Supervisor			Approve Disapprove
Dean/Director			Approve Disapprove
Vice President			Approve Disapprove
President			Approve Disapprove