

Application for Phased Retirement

University of Kansas

Procedures

- 1) Review the phased retirement policy: <http://policy.ku.edu/chancellor/phased-retirement> for specific information about the Phased Retirement program.
- 2) Complete this application and forward to your supervisor/department chair/director and then to your unit director/dean/vice chancellor for review and endorsement.
- 3) The unit director/dean/vice chancellor's office forward the application to HRM for approval.
- 4) Upon approval, HRM will issue a Phased Retirement Agreement to the applicant for signature.

Employee Request

Name _____

Title _____

Department/Unit _____

Phased Retirement FTE Requested (minimum=25%; maximum=50%)*: _____

Phased Retirement Contract Length Requested (maximum of 3 years)*: _____

Phased Retirement Start Date _____

*NOTE: The FTE and contract length may not be increased after agreement has been signed by all parties.

Current Allocation of Effort and Responsibilities

Outline your current job duties, or attach a current job description, describing the percentage of effort and activities performed. If teaching, include the number of courses taught each semester, research projects, and service activities.

Phased Retirement FTE and Responsibilities

Outline your phased retirement job duties if they differ from your current position.

For faculty positions, indicate teaching, research and service commitments and level of effort (including percentages) per semester through the phased retirement years requested.

Employee Signature

Date

Phased Retirement Application Review and Endorsements

Supervisor or Department Chair Review

I have reviewed this phased retirement plan. By my signature below, I indicate my endorsement of the plan and that:

1. It will not interfere with the ability of the department to meet its obligations to students.
2. The activities specified are appropriate for the level of effort.
3. The department as well as the faculty member will benefit from the phased retirement.
4. If the position is grant funded, Office of Research approval must be secured and attached to the application.

Signature

Date

Name (please print) _____

Dean, Vice Provost or University Director Review

I have reviewed this phased retirement plan. By my signature below, I indicate my endorsement of the plan and that:

1. It will not interfere with the ability of the department to meet its obligations to students.
2. The activities specified are appropriate for the level of effort.
3. The department as well as the faculty member will benefit from the phased retirement.
4. If the position is grant funded, Office of Research approval must be secured and attached to the application.

Signature

Date

Name (please print) _____

Forward completed application to: ImageNowMail_FacultyDev@ku.edu

Enter the employee ID of the applicant in the subject of the email message.

Applicants who have been approved will receive a Phased Retirement Agreement that formalizes the terms outlined in this application for notarized signature.