

# Pierpont Community and Technical College

## REQUEST TO ENTER Post Retirement Employment Program

*Note: Please request approval from the Dean (for faculty requests) or appropriate cabinet member (for non-classified or classified staff requests) prior to submitting this form. Additionally, notice must be given at least six months in advance of effective date. Once request to enter PREP has been approved, decision to enter PREP may not be rescinded by employer except for cause.*

I, \_\_\_\_\_, after consultation with the Human Resources Office about the provisions of the Pierpont Community & Technical College's Post Retirement Employment Plan, elect to enter the plan effective \_\_\_\_\_ for a one-year period.

**Faculty election (please check one):**

- 1/3 time in the fall semester and 1/3 time in the spring semester of academic year
- 2/3 time in the fall semester (all pay will be received during fall semester)
- 2/3 time in the spring semester (all pay will be received during spring semester)

**Non-Classified / Classified election (complete / check one of the following):**

1/3 of employee appointment year as follows

- Consecutive months beginning \_\_\_\_\_ and ending \_\_\_\_\_
- Twelve and one-half hours per week for entire appointment length

I understand that Pierpont Community & Technical College will continue to provide me with all rights and privileges, which are normally extended to faculty, or staff who hold full-time status, except for benefits coverage. No employer paid benefits, other than Social Security and Worker's Compensation, will be provided under the PREP.

I understand my base salary during the period of participation in the PREP shall be reduced to 33%, as of the effective date of the PREP contract.

I understand it is my responsibility to contact the Benefits Office, the appropriate retirement company, and other agencies to assure that health insurance and other benefit options are properly maintained.

I understand I may, without penalty, at any time, opt to terminate my employment with Pierpont Community & Technical College as a post retirement employee. If this option is taken, at the termination of employment in the PREP I will have no vested employment rights with Pierpont Community & Technical College.

I understand that at the end of the designated period of post retirement employment, I have no vested employment rights with Pierpont Community & Technical College. Extension of this program will be considered on a year-to-year basis by mutual agreement.

**Initial Meeting with Human Resources**

The post retirement plan has been explained to the employee by Human Resources.

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

\_\_\_\_\_  
Assistant VP / Human Resources Date

**Current Department/Unit Head Completion**

Will this employee continue employment within the same organizational unit or department?  Yes  No

If yes, please list the duties that this employee will perform during PREP (if needed, a list of job duties may be attached to this form):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If yes, please indicate below how the PREP will be funded.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Supervisor Date

**Budget Approval**

If the employee will remain in the same department/school, is budget available? If yes, please complete funding information below.  Yes  No

Fund: \_\_\_\_\_ Org: \_\_\_\_\_ Percentage: \_\_\_\_\_  
Fund: \_\_\_\_\_ Org: \_\_\_\_\_ Percentage: \_\_\_\_\_

Is this a chargeback condition?  Yes  No

\_\_\_\_\_  
Authorized Budget Signature Date

Is chargeback to FSU approved?  Yes  No

\_\_\_\_\_  
Pierpont Vice President for Administrative & Fiscal Affairs Date

**Cabinet Approval**

After consultation with president, please sign below:

\_\_\_\_\_  
Dean Date

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

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