

APPLICATION FOR FACULTY EARLY RETIREMENT PROGRAM (FERP)

INSTRUCTIONS: Before completing this application, carefully read [Article 29](#), Faculty Early Retirement Program, of the Collective Bargaining Agreement (Unit 3) between the Board of Trustees of the California State University (CSU) and the California Faculty Association (CFA). Applications for the Faculty Early Retirement Program (FERP) must be filed at least six (6) months prior to the beginning of the academic year of initial participation. The SUBMISSION of this application shall constitute the required notice to the President. **Once it has been signed by the department chair/unit head and dean or appropriate administrator, please submit completed application to the Office of Faculty Affairs and Development (WH B368) for further processing.**

Check One Box: I have filed a retirement application with PERS. I am filing a retirement application with PERS.

Effective Date of Retirement (Month, Day, Year) Begin FERP Participation Effective (Academic Year)

Name of Faculty Member: Phone Number:

Address (Street Address, City, State, Zip Code):

Department: College/Division:

Appointment Date: Year Tenure Granted: Years of Service:

Date of Birth: Age at Retirement: Rank at Retirement:

Proposed Period of FERP Employment and Request:

Fall Semester Only (12 Instructional WTUs and 3 Service WTUs)

Spring Only (12 Instructional WTUs and 3 Service WTUs)

Academic Year (6 Instructional WTUs per semester and 1.5 Service WTUs per semester)

50% Workload for Librarians or Counselors Other (lower time base)

The applicant understands the forgoing assignment may not be altered during the period of employment except by the President.

I have a sabbatical or difference-in-pay leave return service obligation: YES NO

I elect to carry 48 hours of my accrued sick leave into my FERP appointment: YES NO

I understand I shall be entitled to this yearly period of employment for no more than five (5) consecutive academic years. Consequently, my FERP period of employment will continue through the end of the academic year consistent with the arrangements made with the department chair and college dean or appropriate administrator.

I am submitting this application in compliance with Article 29 of the Collective Bargaining Agreement between the Board of Trustees of the CSU and CFA. I understand that I shall serve during the term of employment determined by the campus, that as a tenured faculty member I shall fulfill my employment obligation and service contributions (including teaching, advisement committee service, and other instructionally related assignments) that would be required had I not retired, and that if this application is granted, I have the right to continued employment at the rank held at the time of retirement for the duration of my participation in the FERP. I also understand that my right to continued employment shall be terminated at an earlier date in the event of dismissal for cause, layoff, or failure to meet the employment commitment.

Signature of Faculty Member:

Date:

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Faculty Member's Name:

Department:

DEPARTMENT CHAIR OR UNIT HEAD

I support the applicant's requested FERP assignment.

SIGNATURE:

DATE:

COLLEGE DEAN OR APPROPRIATE ADMINISTRATOR

Approved

Not Approved

SIGNATURE:

DATE:

FORWARD TO FACULTY AFFAIRS FOR PROCESSING

PROVOST/VICE PRESIDENT OF ACADEMIC AFFAIRS

Approved

Not Approved

SIGNATURE:

DATE:

VICE PRESIDENT OF STUDENT AFFAIRS (for Counselors Only)

Approved

Not Approved

SIGNATURE:

DATE:

UNIVERSITY PRESIDENT

This FERP appointment is subject to the terms and conditions of the current Collective Bargaining Agreement between the Board of Trustees of the California State University and the California Faculty Association for Unit 3 (Faculty). Your election to participate in the Faculty Early Retirement Program becomes effective with the beginning of the academic year _____, during which your term of employment will be: (complete and check one box)

At the rank of:

15 WTUs for the following semester:

Fall

Spring

15 WTUs for an academic year

In subsequent years, it shall be the responsibility of the appropriate administrative unit to inform you of a change in your assignment. Any change in the foregoing for the period of employment must be approved by the President in advance.

SIGNATURE:

DATE:

Original: Personnel Action File of Applicant

Copies to: Applicant | Department Chair or Unit Head | College Resource Manager | Human Resources Management | Dean or Appropriate Administrator