



Office of Faculty Affairs
<http://csulb.edu/aa/personnel> 562-985-4128

Notification of Intent to Retire / Participate in FERP

To: Holly Harbinger
 Associate Vice President of : UW `mi5 ZUjfg

Via: College Dean
 Department Chair

Subject: NOTIFICATION OF INTENT TO RETIRE (FERP OPTION AS APPROPRIATE)

This notice serves to inform you of my intention to apply for retirement. *It is my responsibility to complete and submit the required CalPERS Retirement Application Form.* A copy of the form and assistance in selecting a retirement date can be obtained from the Benefits Services Manager, 562-985-8266. To rescind a submitted application, I must notify CalPERS [<http://www.calpers.ca.gov/>] immediately, 888-225-7377, and **not** cash my first pension payment.

RETIREMENT OPTIONS

Select one option and fill-in the information which applies to the retirement option you checked.

SERVICE RETIREMENT

My planned service retirement date is: _____

SERVICE RETIREMENT AND PARTICIPATION IN THE FACULTY EARLY RETIREMENT PROGRAM (FERP) BY ELIGIBLE TENURED FACULTY. I understand that my selected assignment of FERP is at the discretion of the University and requires approvals, dependent primarily upon the recommendation of the department chair and dean and their assessment of program impact.

Article 29 of the Collective Bargaining Agreement entitles faculty to five years of consecutive FERP employment after retirement. I will notify the chair, dean, and the Associate Vice President of Faculty Affairs in writing to confirm my FERP selection or my decision to rescind my retirement notice.

My planned service retirement date is: _____

My FERP employment will begin with the semester or academic year as indicated:

	Year
<input type="checkbox"/> Full-Time Fall Semester	
<input type="checkbox"/> Full-Time Spring Semester	
<input type="checkbox"/> Half-Time for the Academic Year	
<input type="checkbox"/> Other, less than Full-Time <i>(Please indicate)</i>	

SIGNATURE OF FACULTY MEMBER

DATE

PRINT NAME OF FACULTY MEMBER

COLLEGE/DEPARTMENT

FORWARD TO DEPARTMENT CHAIR AND DEAN FOR SIGNATURE

DEPARTMENT CHAIR

DATE

COLLEGE DEAN

DATE