



**Office of Academic Personnel**  
<http://csulb.edu/aa/personnel> 562-985-4128

## Notification of Intent to Retire / Participate in FERP

**To:** Holly Harbinger  
 Associate Vice President of Academic Personnel

**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 Academic Personnel 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:	<input type="checkbox"/> Full-Time Fall Semester	Year
	<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>	

<b>SIGNATURE OF FACULTY MEMBER</b>	<b>DATE</b>
<b>PRINT NAME OF FACULTY MEMBER</b>	<b>COLLEGE/DEPARTMENT</b>

<b>FORWARD TO DEPARTMENT CHAIR AND DEAN FOR SIGNATURE</b>			
<b>DEPARTMENT CHAIR</b>	<b>DATE</b>	<b>COLLEGE DEAN</b>	<b>DATE</b>