**APPLICATION FOR PRE-RETIREMENT SEMESTER LEAVE**

FACULTY INFORMATION

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Faculty Name: |  | | | Faculty Rank: | |  | |
| School/Department: | |  | | | | | |
| Date First Employed at Pratt: | | |  | | Date Became Full-time or  CCE Faculty Member: | |  |

I am applying to participate in the Pre-Retirement Semester Leave being offered by Pratt Institute. I agree to the terms of Pratt Institute’s Pre-Retirement Semester Leave program as outlined in the program documents. I further understand that by signing and submitting this form, I am providing notice of my intention to retire from my present position as a  with Pratt Institute. Further, I understand that my agreement to retire is a pre-condition to my participation in this program and that once I am notified that I have been accepted to participate in this program, I have seven (7) days (the “Revocation Period”) to revoke it by indicating my desire to do so in writing to Human Resources and/or the Provost. After seven (7) days I will not be permitted to revoke my election. If I violate any of Pratt Institute’s policies either before or during the paid leave, Pratt reserves the right to revoke the leave.

*I hereby agree to retire from my present position as a*  *at the Pratt Institute as of* *.* Once approved for the leave, employees must submit a notice of retirement to their department and the Director of Human Resources.

I understand that if approved to participate in the Pre-Retirement Semester Leave that I am no longer eligible to participate in the Pre-Retirement Teaching Option as defined byArticle XXII of the Local 1460 Collective Bargaining Agreement as a full-time faculty member.*(Please initial here)* \_\_\_\_\_\_\_.

**GENERAL RELEASE**

The above participant, individually and on behalf of his/her, successors and assigns hereby unconditionally relieves, releases and forever discharges Pratt Institute and its trustees, agents, successors, assigns, representatives, attorneys, heirs, executors, administrators, and employees, of and from any and all claims, debts, liabilities, demands, judgements, accounts, obligations, promises, acts, agreements, costs, expenses (including but not limited to attorneys’ fees), damages, actions and causes of action of any kind or nature, whether known or unknown, suspected or unsuspected, fixed or contingent based on, arising out of, relating to or in connection with any act, omission, statement, occurrence, obligation or condition existing as of or prior to the execution of the agreement between named employee and the Pratt Institute. Participant acknowledges that s/he has been fully and fairly represented by UFCT 1460 and hereby releases and forever discharges UFCT 1460 from any and all liability in connection with this matter.

The above participant acknowledges that s/he: (a) has carefully read this Application and the Pre-Retirement Semester Leave program documents in their entirety; (b) has had twenty-one (21) days to consider its terms; (c) is hereby advised by the Institute in writing to consult with an attorney of his/her choosing in connection with this Agreement; (d) fully understands the significance of all of the terms and conditions of this Agreement and has discussed them with his/her independent legal counsel, or has had a reasonable opportunity to do so; (e) has had answered to his/her satisfaction any questions he has asked with regard to the meaning and significance of any of the provisions of this Agreement; and (f) is signing this Agreement voluntarily and of his/her own free will and agrees to abide by all the terms and conditions contained herein.

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Employee Signature Date

**APPROVALS:**

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ASSISTANT VICE PRESIDENT OF HUMAN RESOURCES Date

OFFICE OF THE PROVOST: I hereby approve disapprove this application.

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PROVOST Date