BSC Phased Faculty Election Form

**Eligibility**

*Full-time, tenured members of the faculty, who have at least twenty (20) years of full-time service at Birmingham-Southern College when the Phased Retirement period begins, are eligible to participate. For complete information on the Birmingham-Southern College Voluntary Phased Retirement policy, please refer to the attached sheet.*

Faculty Member’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years of Service: \_\_\_\_\_\_\_

**Duration of Participation Period**

***The phased retirement duration shall be for a period of one, two, or three academic years, as indicated below. THE PHASED RETIRMENT ELECTION IS IRREVOCABLE. The elected timeframe specified in this Phased Retirement Election Form may not be extended for any reason. Therefore, employment will be terminated at the end of the agreement period. If you elect a phased retirement period, you must enter into a Full-Time Tenured Faculty Phased Retirement Contract which specifies your retirement date.***

I will participate in the phased retirement program for the next \_\_\_\_\_ academic years (max of 3).

My final year of service will be academic year \_\_\_\_\_\_\_\_\_\_ (e.g., 2020-21)

**Salary and Teaching Load**

*For those participating in the Phased Retirement Program, salary will be based on a prorated percentage of teaching load undertaken in each of the academic years in the Phased Retirement Period. The following teaching/salary options may be chosen: 3-0-3, 2-1-3, or 3-1-2 (pay at 90% rate = 6/7th teaching load category) or 2-1-2, 3-0-2 or 2-0-3 (pay at 80% rate = 5/7th teaching load category.* ***The option chosen can vary during each year of the agreement; however, the rate can never exceed that of the previous year.***

**Please indicate your requested load below:**

Year 1 teaching load: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year 3 teaching load: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year 2 teaching load: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee: Provost:

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

Signature/date:

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