



## Lethbridge College Phased Retirement Program Instructions for Completing an Application

The phased retirement program uses a two part form - section 1 for applying for consideration and Section 2 for College leadership approval process. To ensure accurate completion of the form, the following is offered for assistance.

### 1. Applicant Information

- a) Name - include full name
- b) Employee# - Lethbridge College employee number
- c) Department or school - include full name of school (example School of Media & Design)
- d) Work Unit - include name of program area (example Fashion Design & Marketing)
- e) Age/Service - criteria of the program require applicants to be at least 55 years of age and have completed at least 10 years of continuous service with the college

### 2. Duration - the duration of the phased retirement period shall be a minimum of one (1) and a maximum of three (3) years.

### 3. Dates

- a) Last day of full-time employment - as faculty this will normally be the last day of the academic year which is June 30<sup>th</sup>, although participants age 60 or older, planning on taking early CPP benefits will need to consult CPP requirements to determine eligibility.
- b) Commencement of **LAPP** benefits - normally the next calendar day following last day of full-time employment.
- c) Commencement of phased retirement period - normally, the commencement date will coincide with the start of the fall semester of an academic year.
- d) End of phased retirement period - normally the last pay period of the academic year which would be June 30<sup>th</sup>

### 4. Requested percent (%) workload - the part-time percentage shall not be less than 50% nor greater than 75%. This supports the goal of the program of offering a managed transition to retirement.

### 5. Applicant's signature - must be signed and forwarded to Supervisor.

### 6. College Leadership Council (CLC) member recommendation - must indicate "Support" or "Do Not Support". Must be signed by supervisor prior to forwarding to CLC member.

7. Rationale - rationale must be provided for not supporting the application (example: Two other members from the same area are applying for the phased retirement program this year. I cannot afford to lose this much expertise at the same time.)
8. Recommended Priority - should there be several applications for participation in the program from the same area, indicate the recommended priority, should only one be accepted (example - priority one of the two applications received).
9. CLC signature - must be signed prior to forwarding to Manager of Human Resource Services.

**Deadlines for applications and processing**

1. Deadline for applications to be submitted to Supervisor - November 15<sup>th</sup>
2. Recommendations completed by Supervisor - November 20<sup>th</sup>  
Recommendations completed by CLC member – December 1
3. Recommendations received by Manager Human Resource Services - December 9<sup>th</sup>
4. Applications to be finalized by the appropriate CLC member and ELT member appropriately informed - January 15<sup>th</sup>
5. Notification from Human Resources sent to applicants by January 31<sup>st</sup>

# Phased Retirement Application

## Section 1

### 1. Applicant Information

Name: \_\_\_\_\_ Employee # \_\_\_\_\_

Department/School: \_\_\_\_\_

Job Title/Program: \_\_\_\_\_

I meet the age/service requirements (min age 55 with 10 years of LC service) Yes ☐ No ☐

2. Duration of requested phased retirement period: 1 year ☐ 2 year ☐ 3 year ☐

3. Last day of full-time employment (normally June 30<sup>th</sup>, last day of academic year) \_\_\_\_\_

4. Commencement of LAPP benefits (normally day after last day): \_\_\_\_\_

5. Commencement of phased retirement (normally first day of academic year): \_\_\_\_\_

6. End of phased retirement period (normally last day of academic year): \_\_\_\_\_

7. Proposed workload percentage: Year 1 \_\_\_\_\_% Year 2 \_\_\_\_\_% Year 3 \_\_\_\_\_%

I hereby acknowledge that I have sought advice on and understand the financial and pension implications to me of retiring from Lethbridge College and undertaking the phased retirement program offered by the college. I am prepared to mentor, assist with orientation, and share instructional expertise and wisdom with any faculty engaged as my replacement. I also understand that once I have formally resigned and been re-hired by the college as a result of my participation in this program, this decision is irrevocable.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: application must be submitted to your supervisor by November 15<sup>th</sup>.

## Section 2 – To be completed by supervisor

1. Name: \_\_\_\_\_ Employee #: \_\_\_\_\_

2. Supervisor Recommendation: Support ☐ Do not Support ☐

3. Rationale if not supported:

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4. Recommended priority of this application compared to other applications from within the area for the same period of time.

Number \_\_\_\_\_ out of \_\_\_\_\_

5. Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Section 3 – CLC Member Support and Signature

1. CLC Member Approval: Support ☐ Do not Support ☐

2. CLC Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Completed forms to be forwarded to Human Resources by December 9<sup>th</sup>