



Application For Incentive Retirement Plan

(Available only to Faculty and Professional Staff who participate in the University's retirement Plan for Faculty and Professional Employees and to Faculty who participate in the Maine State Retirement System. To be eligible for the Incentive Retirement Plan, a Faculty member (represented and non-represented) must have been employed prior to July 1, 1996; represented and non-represented professional employees must have been employed prior to July 1, 2006.)

CAMPUS: (circle one) UM UMA UMF UMFK UMM UMPI USM SWS

EMPLOYEE INFORMATION

PRINT NAME _____ SOCIAL SECURITY # _____ - _____ - _____
First Middle Last Social Security Number

ADDRESS _____
Street City State Zip Code

BIRTHDATE ___/___/___ EMPLOYMENT DATE* ___/___/___ RETIREMENT DATE ___/___/___

DEPARTMENT/COLLEGE _____ TITLE/RANK _____

SIGNATURE _____ DATE _____

*Use most recent date of hire as a regular employee in the case of non-continuous service. In the case of a split career (hourly and professional service), please indicate the date of change to professional status as well.

NOTE: Employees who retire are not eligible to be re-employed anywhere in the University of Maine System on a full-time regular status.

For Campus/Department Use Only

PRESENT ANNUAL BASE SALARY \$ _____ YEARS OF SERVICE _____
 INCENTIVE CONTRIBUTION:(Base Salary x 1.5% x Completed Years of Service) = \$ _____
(Maximum 27 Years)

Comments: _____

Department Chairperson	Date	Vice President	Date
Dean/Director	Date	President/Chancellor	Date

For Use by System Office of Human Resources Only

DATE APPLICATION RECEIVED: _____ DATE REMITTED: _____

AMOUNT REMITTED:\$ _____ --
System Office of Human Resources

Distribution: Original to System Office of Human Resources. Copies to campus office Human Resources, initiating Department, President/Chancellor.