

**Phased Retirement Application Form**

***Note: Please consult the*** [***Phased Retirement Policy***](https://www.slu.edu/provost/policies/faculty/faculty-phased-retirement-policy-1-11-25.pdf) ***before initiating this form.***

**Instructions**

1. The requesting faculty and chair (and/or dean, as applicable) should collaborate on the details of the proposed Phased Retirement Plan and related annual workload allocation. The governing dean must also endorse the plan. Ultimately, the Provost makes the final decision on approval.
2. This document should be saved as a PDF when completed, and all parties should save a copy.
3. Only the dean shall submit the completed form to the Office of Faculty Affairs for the Provost’s review and approval.
4. **Deans:** Upload the completed PDF form to the Office of Faculty Affairs [**via this link**](https://docs.google.com/forms/d/e/1FAIpQLSef19IbCjO9XBO183FWFON_iJ4fuUNKMVuoDiSxqRH9pz0y8g/viewform)no later than July 1 of the year prior to the first year of the proposed phased retirement period.

**Faculty Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** | **Last Name** | **SLU ID#** | **Contract Status** |
|  |  |  | [ ]  Tenured[ ]  Non-Tenure Track |

|  |  |  |
| --- | --- | --- |
| **Primary College/School/Center/Library** | **Primary Department** | **Faculty Rank** |
|  |  | [ ]  Instructor[ ]  Assistant Professor[ ]  Associate Professor[ ]  Professor |

**Proposed Phased Retirement Plan Details**

|  |  |  |
| --- | --- | --- |
| **Requested Plan Duration** | **Requested Starting Term** | **Requested Plan Level** |
| [ ]  One Academic Year[ ]  Two Academic Years[ ]  Three Academic Years | [ ]  Fall 2025 [ ]  Fall 2026[ ]  Fall 2027[ ]  Fall 2028  | [ ]  75% (*approximately* 30 hrs/week, 16 workload units)[ ]  51% (*approximately* 20 hrs/week, 12 workload units)[ ]  25% (*approximately* 10 hrs/week, 8 workload units) |

*continued…*

**Proposed Annual Workload Assignments**

*Please summarize the proposed annual workload assignment, addressing teaching, scholarship/research, service, clinical work, administrative work, or librarianship (if applicable). The allotted space will expand as you type. If the workload will vary by plan year, please make that clear.*

|  |
| --- |
| **Proposed Phased Retirement Plan Annual Workload Assignment** |
|  |

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**Chair’s Endorsement**

|  |  |  |
| --- | --- | --- |
| **First Name** | **Last Name** | **Date of Visit** |
|  |  | Click or tap to enter a date. |

**Dean’s Endorsement**

|  |  |  |
| --- | --- | --- |
| **First Name** | **Last Name** | **Date of Visit** |
|  |  | Click or tap to enter a date. |

***Note:*** *Faculty within one year of the eligibility age thresholds established in* [*the previous Faculty Retirement Policy*](https://www.slu.edu/provost/policies/faculty/policy-faculty-phased-retirement.pdf) *may choose to apply for phased retirement via the stipulations of either the new policy (approved in January 2025) or the previous policy; this option expires on January 11, 2026. For details, please contact the* *Office of Faculty Affairs* *directly.*

**REMINDER:**

**Only deans should submit this form, and only upon their endorsement of the plan detailed herein. The Provost has the final approval of any proposed phased retirement plan.**