Early Retirement Incentive Plan Application

Name:	Planı	ned Retirement Date:
		(07/01/XX or 09/01/XX)
Due to H	uman Resources on or b	efore February 1 st
At the end of this contract Plan according to Policy 4	• • • • • • • • • • • • • • • • • • • •	n the Early Retirement Incentive
At the end of this contract School District.	year I will have worked	years for Churchill County
As of(date	e) I have years of	PERS service credit.
Options (read Policy 4811 1 I request	for option descriptions): that the District purchase 1	year of retirement credit.
2 I request to a n	•	etirement credit with my unused
3 I request that the District purchase health insurance in lieu of option 1.		
4I request	that the District purchase h	nealth insurance in lieu of option 2.
	this document serves as r tract year as required by P	ny letter of resignation effective at olicy 4811.
If my request is not approvention	ved, I (will or	will not) resign at the end of this
Personal Email:	Horr	ne/Cell Phone:
Signature	Date	
	For District Use O	nly
		as of:
Age at Retirement:	PERS Eligi	ble for Retirement:
Board Approved Date:		
Comments:		