

**Voluntary Separation Incentive Program
Letter of Intent to Separate/Retire – Non Faculty**

I,
(Employee Name)

hereby submit my intention to participate in the Voluntary Separation Incentive Program by submission of this application letter.

I understand that my letter of intent/application to separate from employment must be submitted and received by the President AND the Human Resources Officer no later than July 31, 2020.

Upon receipt of approval, from the President AND the Human Resources Officer, of my letter of intent for the Voluntary Separation Incentive Program, I will submit to the President AND the Human Resources Officer, on the specific approved College form, an irrevocable letter of resignation for the purpose of separation from employment or retirement which shall be effective not later than September 28, 2020. Please submit this letter no earlier than September 1, 2020, and not later than at least ten (10) calendar days prior to the separation date to allow required review and processing time.

This offer by the College is made under the following terms and conditions:

I understand that the College is offering a Voluntary Separation Incentive Program to full-time employees, age 55 or older on regular appointment who have completed ten (10) years or more of full-time continuous service at SUNY Broome Community College/Broome County immediately preceding their separation from service.

The Voluntary Separation Incentive shall be equal to fifty percent (50%) of my annual base salary for the 2019-2020 year of employment and shall be paid in one (1) lump sum to me no later than October 30, 2020.

As an employee who is eligible to apply for the Voluntary Separation Incentive Program, if I am not approved by the College due to staffing and/or operational considerations, I understand I will be allowed to rescind my letter of intent/application and/or separation letter.

As an employee participating in the Voluntary Separation Incentive Program I understand that I will not be entitled nor eligible to combine this Separation Incentive with any other bargaining unit retirement or separation incentive or retirement or separation incentive offered by the State of New York.

Print Name/Department Name

Proposed Separation Date

Signature

Date

Please submit to: Dr. Kevin E. Drumm President: drop off at Wales Office #107; Interoffice Mail Stop #95, or scan document via email to drummke@sunybroome.edu AND the Human Resources Officer at #103 Wales Building; Interoffice Mail Stop #38; or scan document to Lynn M.Fedorchak, Human Resources Officer at hr@sunybroome.edu.

Approval/Disapproval Date: _____ President's Signature _____