

NOTIFICATION OF INTENT TO RETIRE

NAME _____

BYU ID _____ Date of Birth _____

College, Division or Administrative Area _____

Requested Retirement Starting Date _____

*Retirement start date should be the on the 1st day of a month.

Signature of Applicant

Date

Dean or Director

Date

TO BE COMPLETED BY THE BENEFITS OFFICE:

Applicants Credited Years of Service _____

Hire Date _____

Age at Retirement _____

OTHER CONSIDERATIONS:

APPROVALS:

Benefits Services Representative

Date