

Request Reimbursement for Leave Upon Retirement

TO: Argyle ISD Human Resources

DATE: _____

FROM: _____ **EMPLOYEE #** _____

CAMPUS: _____ **DEPT:** _____

RETIREMENT MONTH AND YEAR: _____

I hereby request reimbursement for unused leave. My application for retirement is being processed under the Texas Retirement System with an effective date of _____, at which time I will have _____ years of continuous service with Argyle ISD. I have read Argyle ISD Board Policy DEC (LOCAL), which outlines the criteria used for Reimbursement for Leave Upon Retirement. In summary DEC (LOCAL) requires the following:

1. The employee's retirement is voluntary, ie., the employee is not being discharged, nonrenewed, and is not entering into a resignation agreement in lieu of such potential action(s).
2. Contract employees must provide written notice at least 90 days before the last day of employment. Non-contract employees must provide written notice at least two weeks before the last day of employment.
3. The employee has at least 5 years of continuous service with the District.
4. The employee shall be reimbursed for each day of leave, to a maximum of 90 days, at a currently adopted rate of pay for an instructional substitute.

My TRS 7 form has been submitted to the Argyle ISD payroll office.

Reimbursement for accrued leave is processed on your final paycheck from Argyle ISD.

Employee Signature

Employee ID

Date