

BOARD OF TRUSTEES
HUMBOLDT COUNTY SCHOOL DISTRICT

POLICY 3035
BUSINESS, NON-INSTRUCTIONAL

MAXIMUM CONTRIBUTION AMOUNTS FOR RETIREMENT INCENTIVE PLAN

District Contribution to PERS

Maximum Contribution for Year 1	1.00
Maximum Contribution for Year 2	0.50
Maximum Contribution for Year 3	0.33
Maximum Total Contribution	1.83

Adopted 9/28/04 Revised 7/12/05 Revised 2/09/10

EARLY RETIREMENT INCENTIVE PLAN APPLICATION

(Applicant Information)

NAME: _____ Date: _____

SOC. SEC. NO. _____ BIRTHDATE: _____

1. Current year contract or salary amount _____
2. Years of service with Humboldt County School District at the end of this contract year

3. Years of service with PERS at the end of this contract year _____
4. Number of years of service credit previously purchased _____
5. Number of years of service credit requested for purchase _____
(If requesting more than one-year purchase, refer to section 10 of Incentive Policy)
6. Please attach any additional information you deem necessary that may assist in the Board's consideration of your application.

I, _____, understand that the Humboldt County School District's Early Retirement Incentive Plan is completely voluntary and the Board of Trustees reserves the right to limit the number of people who will be accepted and funded in this plan in any one year.

Date: _____

Applicant's Signature

(Application Deadline January 7)

HUMBOLDT COUNTY SCHOOL DISTRICT

EARLY RETIREMENT INCENTIVE PLAN ACCEPTANCE AGREEMENT

NAME: _____ DATE: _____

Your name will be submitted to the Humboldt County Board of School Trustees _____
, 20_, to act on your Early Retirement Application. The Board will consider the
purchase of
_____ year(s) service credit on your behalf. To complete this process it is
important to have your irrevocable resignation prior to the Board meeting. The
Board will take action on your service credit purchase and resignation at the same
time. Your resignation will be acted upon only if the Board agrees to purchase
_____ year(s) of service credit for you.

To: Humboldt County Board of School Trustees

In consideration of the District purchasing _____ year(s) of service on my
behalf, I hereby submit my formal irrevocable resignation of my position as a full
time employee from the District effective _____, 20_.

Date: _____

Signature