Kirkwood Community College
Retirement Incentive Program Application and Acknowledgement

The Board of Trustees of Kirkwood Community College ("Board") has extended an offer of a retirement incentive program to its employees as outlined in Board Policy No. 321. In exchange for the benefit provided to an employee pursuant to this retirement incentive program, the employee agrees to be bound by the terms of that policy and the terms outlined in this Application and Acknowledgment.

I, _____, wish to apply for the retirement incentive program pursuant to the terms and conditions of Board Policy No. 321 - Retirement Incentive Program for Employees. In making this application, I agree to be bound by the following terms:

1. Acceptance of my application by the Board shall be considered by the Board as a voluntary resignation effective _____.
2. I certify that prior to the effective date of my retirement, I will have completed _____ consecutive years of service with Kirkwood Community College. I acknowledge that the salary-related retirement benefit will be based upon my consecutive years of service with the College.
3. I certify that I meet the age and service requirements of Board Policy No. 321 - Retirement Incentive Program for Employees.
4. I acknowledge that a reasonable time was provided for deliberation on this matter, that I have been provided an opportunity to consult with an attorney regarding this agreement, and that I voluntarily entered into this agreement with Kirkwood Community College.
5. In signing this application and agreement, I do not rely and have not relied upon any representation or statement not set out herein made by anyone with respect to this agreement.
6. I understand that by accepting the retirement incentive payment, I forfeit future eligibility for re-employment at Kirkwood as a full-time, Board-approved employee.
7. In signing this application, I hereby certify that the information provided in it by me is accurate. I acknowledge that inaccurate information provided by me may be basis for rejection of my application.

_____ _____

Employee Signature Date

_____ _____

Notary Public in and for the State of Iowa Date

This application is approved/denied the _____ day of _____, _____.
Date Month Year

_____

President, Board of Trustees
Kirkwood Community College