

# **Department of Human Resources**

# 2025 Voluntary Separation Incentive Program (VSIP) Application Form

Employee ID	Employee First & L	ast Name	<b>Requested Separation Date</b>	
<b>Division Name</b>	Department N	lame	Job Title	
	Email		Phone Number	
Appropriate Administrator/Manager Name		VP/President Name		

#### **SECTION II - EMPLOYEE CERTIFICATION**

	Employee Signature	Date Signed	
•	<ul> <li>I have read the entirety of this VSIP Intake Form, and understand all provisions hereto, including that the 2025 VSIP will require me to execute an application and a First, then a Final, Separation Agreement and Release.</li> </ul>		
•	I understand that I must sign and submit on or before my last do Separation Agreement and Release, to receive the final 20% of th which I will receive within 30 calendar days.		
•	I understand that upon signature and submission of the First Sep will receive 80% of the calculated severance package within 30 o		
•	I understand the current Severance is equivalent to six months' p \$75,000 and a minimum of \$25,000.	bay, subject to a maximum of	
•	I understand that if eligible to participate in the 2025 VSIP that m chosen for the separation is irrevocable upon signature and sub Agreement and Release.		
•	I understand participation in the 2025 VSIP is voluntary.		
•	I understand the eligibility requirements and I meet the eligibility knowledge.	requirements to the best my	
•	I understand that this program does not create an entitlement, or change at the discretion of management.	and the program is subject to	
٠	I have read and understand the entirety of the 2025 VSIP Terms of	and Conditions.	
١a	cknowledge that I have reviewed and met the following criteria:		

## THIS SECTION TO BE COMPLETED AFTER PRELIMINARY APPROVAL IS RECEIVED BY HR.

SECTION III – SIGNATURE REQUIRED – For separation dates on or before June 30, 2025					
Appropriate Administrator Name		Appropriate Administrator Signature	Date Signed		
Comments: Separation Date Agreed to by Employee and AA					

### SECTION IV – SIGNATURE REQUIRED – For separation dates after June 30, 2025

Appropriat	te Administrator Name (Print)	Appropriate Administrator Signature	Date Signed		
Comments:	Comments: Include Proposed Separation Date Agreed to by Employee and AA				
Vice President Name					
Vice	President Name	Vice President Signature	Date Signed		
Vice	President Name	Vice President Signature	Date Signed		
Vice Comments:	President Name Include Approved Separ		Date Signed		

## SECTION V – APPLICATION INSTRUCTIONS

To initiate the 2025 VSIP (2025 VSIP) Application process, follow these steps:

- 1. Complete the **first page** of this application only.
- 2. Send your signed and complete Application and Resignation/Separation Form to vsip@humboldt.edu or in person to Human Resources at 212 Siemens Hall.
  - You will receive a confirmation of receipt within one business day.
- 3. Applications must be submitted no earlier than April 1, 2025, and no later than 5:00 p.m. on April 30, 2025.
  - Applications will be processed in the order they are received.
  - Applications received after 5:00 p.m. on April 30, 2024, will not be considered.
  - Complete applications will be processed on a first-come, first-served basis in the order in which they were received.
  - There is no guarantee that an application will be processed before the termination of the 2025 VSIP.
- 4. Once an employee receives preliminary approval from HR, they will receive instructions regarding next steps.

Contact benefits@humboldt.edu to schedule a retirement advising session if you want to retire.