



EMORY
COLLEGE
OF ARTS AND
SCIENCES

APPLICATION FOR LECTURE TRACK FACULTY

Voluntary Faculty Retirement Incentive Program

Date: _____

Name: _____

Department: _____

Email: _____

Campus Phone #: _____

Cell Phone #: _____

I am interested in participating in the Emory College Voluntary Faculty Retirement Incentive Program beginning on _____ with a Retirement Date of _____.

Signature _____

Return completed form to:

Senior Associate Dean Carla Freeman

Candler Library, 4th Floor

Your application will be reviewed and you will receive a response within 10 business days of receipt. If your application is accepted, you will receive a copy of the Retirement Agreement and General Release, which must be returned Dean Freeman by June 30 of the calendar year in which the retirement transition would begin.

If you have questions about the Emory College Voluntary Faculty Retirement Incentive Program, please contact Dean Freeman at 404-727-6059.