Human Resources Administrative Services Building, Suite 310 Campus Box 240 P.O. Box 173363

Denver, CO 80217

Phone: 303-352-3042 Fax: 303-556-6557 Website: www.CCD.edu/HR



Faculty Post Retirement Approval Form

Employee Information

| Name: First | | M.I. | Last |
|---------------------------|------------|-------------------------|----------|
| S #: S | | Phone #: | |
| Department: | | Date: | |
| Hire Date: | | Transition Year Dates: | |
| Base Salary: | | Transition Year Salary: | |
| Budget Officer: | | | |
| | Print Name | Signature | Date |
| Human Resources Director: | Print Name | Signature | Date |
| | | | |
| Approval Signatures | | | |
| Faculty Member: | | | |
| _ | Print Name | Signature | Date |
| Dean: | Print Name | Signature | Date |
| Provost: | | | |
| | Print Name | Signature | Date |
| President: | Print Name | Signature | Date |