

Department of Human Resources

2025 Voluntary Separation Incentive Program (VSIP) Application Form

SECTION I – EMPLOYEE INFORMATION (to be completed by Employee)

Employee ID	Employee First & Last Name	Requested Separation Date
Division Name	Department Name	Job Title
Email	Phone Number	
Appropriate Administrator/Manager Name	VP/President Name	

SECTION II – EMPLOYEE CERTIFICATION

I acknowledge that I have reviewed and met the following criteria:

- I have read and understand the entirety of the 2025 VSIP Terms and Conditions.
- I understand that this program does not create an entitlement, and the program is subject to change at the discretion of management.
- I understand the eligibility requirements and I meet the eligibility requirements to the best of my knowledge.
- I understand participation in the 2025 VSIP is voluntary.
- I understand that if eligible to participate in the 2025 VSIP that my decision to separate and the date chosen for the separation is irrevocable upon signature and submission of the First Separation Agreement and Release.
- I understand the current Severance is equivalent to six months' pay, subject to a maximum of \$75,000 and a minimum of \$25,000.
- I understand that upon signature and submission of the First Separation Agreement and Release, I will receive 80% of the calculated severance package within 30 calendar days.
- I understand that I must sign and submit on or before my last day of employment, the Final Separation Agreement and Release, to receive the final 20% of the calculated severance package, which I will receive within 30 calendar days.
- 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.

Employee Signature	Date Signed

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

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

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, 2025, 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.