

Request to Convert Part Time Faculty to Partially Benefited (Retirement Eligible)

(20-29 standard work hours; 3 courses; 8-10 contact hours)

Name: \_\_\_\_\_ Department: \_\_\_\_\_

KSU/Banner ID: \_\_\_\_\_ HR Employee ID: \_\_\_\_\_

Semester:            Spring                      Fall                      Year: \_\_\_\_\_

Current courses assigned and enrollment: \_\_\_\_\_

Proposed additional course(s) and enrollment: \_\_\_\_\_

Justification for additional course(s): \_\_\_\_\_

\_\_\_\_\_

Faculty member acknowledgement

*I understand that accepting this additional course load will make me retirement plan eligible and require me to contribute to either Teachers Retirement System of GA (TRS) or the Optional Retirement Plan (ORP). More information regarding these plans is available at <https://web.kennesaw.edu/hr/content/trs-orp-retirement-options>. I should contact [benefits@kennesaw.edu](mailto:benefits@kennesaw.edu) to coordinate enrollment as soon as possible.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approvals:

Department Chair: \_\_\_\_\_

Dean: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Manager: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Affairs Office

AFO: \_\_\_\_\_

Coordinator: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_