

University of Maine System Voluntary TEMPORARY Schedule Reduction

When it is mutually beneficial to the University and an employee, a full time regular employee might on an exception basis and with the approval of appropriate administrators, work a temporary reduced schedule without loss of full time regular employment status and appropriate employee benefits. This policy is applicable year round and not only during the summer months. The schedule reduction shall be no less than one-half time, and the schedule may be reduced for a period not to exceed one-third of the employee's work year. The reduction will be for a specified period with a return to full-time regular status guaranteed at its conclusion. All such agreements shall be in writing and signed by appropriate administrators and the employee.

If the mutual agreement is for a period in excess of one-third of the employee's work year, the employee's status would change to part-time regular with a corresponding change in employee benefits.

Once the schedule reduction has occurred, the employee benefits shall be as described below:

Health Insurance Coverage in the group health plan may continue. The employee will pay any premium for which a full-time regular employee is responsible.

Retirement Contributions to TIAA-CREF will be made in the percentages applicable to full-time regular employees. Contribution amounts shall be based on the reduced salary.

Other Benefits Employees with a reduced schedule will continue to be eligible for supplemental life insurance, tax deferred annuities, income protection, and advantage accounts.

Application and Approval Process An application for Voluntary Temporary Schedule Reduction shall ordinarily be submitted at least two months prior to the requested effective date. This time limit may be waived when an earlier effective date is beneficial to both the employee and the University. The application form shall be completed by the employee and submitted to the supervisor. The supervisor shall make a recommendation and forward the form for administrative review, regardless of whether the supervisor's recommendation is positive or negative. The Application shall be reviewed by administrators designated by the campus. A final decision shall be made by the President (Chancellor for System employees) or the President's designee and communicated to the employee in writing.

University of Maine System Application for Voluntary Temporary Reduced Work Schedule

Name: _____
(please print clearly)

MaineStreet ID #: _____

Campus: _____

Department _____

I am paid: Monthly ____ **Biweekly** ____

I request a Voluntary Temporary Work Schedule Reduction to _____% full time effective _____(date) to _____(date). I have read the policy on Voluntary Temporary Work Schedule and fully recognize and agree to the conditions of the reduction in schedule. I further agree that the reduction in no manner constitutes a layoff, and is made and entered into solely at my request with the agreement of the University. This is a voluntary reduction, and I understand that I will not be eligible for Unemployment Compensation because of this reduction.

Employee Signature

Date

Recommendations
Approve Disapprove

Supervisor's Signature

Date

Reason (if recommendation is for disapproval):

Approve Disapprove

Director or Dean Signature

Date

Director Human Resources Services Review

Date

Please attach the employee's new personnel action form and return to the **Payroll Office, 128 School Street, Gorham, Maine 04038**

cc: Benefits Office, 128 School Street, Gorham, Maine 04038