



CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT
Office of Human Resources
Pre-Retirement Load Reduction Form



(Form must be filed with Vice President when Pre-Retirement Load is accepted.)

Chabot College

Las Positas College

(Please Print)

Employee's Name: _____
(Last) (First) (Middle)

SSN/W#: _____

Subject Area: _____ Course #/Section: _____

I request that _____ % of my load commencing _____ Semester 20____
 be reduced.

Signature: _____ Date: ____/____/____
(Faculty Signature)

Approved

Disapproved

Division Dean Signature: _____ Date: ____/____/____

FOR OFFICE USE ONLY

Verified By: _____ Date: ____/____/____
(Vice President, Academic Services)

cc: Payroll Manager
 Vice-President of Business Services
 Division Dean
 Vice Chancellor, Human Resource Services
 Faculty Applicant

Reference: Article 19A – Faculty Collective Bargaining Agreement