



ONA RN Notice of intent to Retire under MOU #7

1. EMPLOYEE INFORMATION

Name: _____ Birth date: _____

Employee Number or Last 4 of SSN: _____

OHSU Retirement Plan: _____

Date of Retirement: _____

2. CERTIFICATION

I have reviewed the Memorandum of Understanding #7 (“MOU”) in the agreement between the Oregon Nurses Association and Oregon Health and Science University dated 12/03/2013. I understand and agree to the terms as prescribed by #2 of the MOU which is also restated in Section 3 below. I understand that I am not eligible for the bonus if I do not meet the criteria stated in MOU #7 or if I previously retired from OHSU and began withdrawing from my PERS or UPP retirement accounts. I understand that retirement contributions will not be made on the Retirement Lump Sum payment as required by Oregon State PERS regulations http://www.oregon.gov/pers/emp/docs/er_general_information/payment_categories.pdf.

3. MEMORANDUM OF UNDERSTANDING # 7 – 2. Retirement payment

Nurses who retire no later than June 1, 2015, and who are age 60 or above and have been employed at OHSU for at least 5 consecutive years at the time of retirement, will receive a one-time payment of \$5,000. To be eligible for this payment, nurses must provide advance notice at least six (6) months prior to their retirement date. A nurse who receives this payment and then returns to employment at OHSU may only be employed as a resource nurse without seniority and will not be eligible for retirement or health insurance benefits. Any forms received for any reason after November 30, 2014 will not be eligible for the retirement payment.

Signature: _____ Date: _____

Please return this form to the OHSU Retirement Office via email – retire@ohsu.edu, fax at 503-494-9882 or mail code: HR Benefits.

For office use:

Hire date: _____ Date Received: _____

Approved: Yes/No if no please add details _____

OHSU Plan Administrator Signature: _____

ONA Retirement Lump Sum Payment Process – Expires November 30, 2014

1. ONA RN Notice of intent to Retire Form must be completed, signed and returned to the OHSU Retirement Department. The form may be returned:
 - a. via email to retire@ohsu.edu,
 - b. via fax 503-494-9882, mail to HR Benefits: Attention Retirement,
 - c. or in person at either: the OHSU Retirement Department located in Marquam Plaza (2525 SW 3rd Avenue) or Healthcare Human Resources Office (located on the first floor of Sam Jackson Hall next to the Sam Jackson Hall Espresso Bar)
2. OHSU Retirement Department will determine if the nurse qualifies for the Retirement Lump Sum payment within 5 business days. The OHSU Retirement Department will notify the employee and manager of the determination.
3. If the nurse qualifies, the OHSU Retirement Department notifies the nurse, the manager, and Healthcare Human Resources. The notification will contain a memo approving the ONA Retirement Lump Sum payment.
4. Nurse emails resignation letter to hchrsc@ohsu.edu and manager 30 days prior to retirement date.
5. The Retirement Lump Sum payment will be included in paycheck.