



VOLUNTARY MODIFICATION OF EMPLOYMENT (VMOE) APPLICATION
UNIVERSITY OF HOUSTON-DOWNTOWN

Note: This application must be submitted to the Senior Vice President for Academic and Student Affairs and Provost once signed by the applicant, department chair, and dean at least one semester prior to the date the VMOE is to become effective. An official letter of agreement will be sent to the faculty member to include the terms and conditions for the VMOE. It is advisable for the faculty seeking VMOE to discuss retirement options with ESO's Benefits Department.

Applicant Name \_\_\_\_\_ Department \_\_\_\_\_

In accordance with PS 02.A.06, \_\_\_\_\_ in the college of \_\_\_\_\_
(name of applicant) (name of college)

seeks voluntary modification of employment effective \_\_\_\_\_ .
(anticipated date)

Signatures:

Applicant \_\_\_\_\_

Date \_\_\_\_\_

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

Date \_\_\_\_\_

Dean \_\_\_\_\_

Date \_\_\_\_\_

Senior VP for Academic and Student Affairs and Provost \_\_\_\_\_

Date \_\_\_\_\_

VP Employment Services and Operations \_\_\_\_\_

Date \_\_\_\_\_