

CITY OF MODESTO
LETTER OF SEPARATION/RETIREMENT

Please mark the box for the program in which you intend to participate:

- VOLUNTARY SEPARATION PROGRAM
- RETIREMENT INCENTIVE PROGRAM

I, _____, per my selection above, intend to separate/retire from the City of Modesto effective on _____, 2009.
(last day of employment)

I certify that I meet the eligibility requirements and will meet the participation requirements established by the City for participation in the Voluntary Separation Program or Retirement Incentive Program.

I understand that: (1) my participation is subject to the City Manager's approval based on the needs of the City, (2) the City Manager's decision is final and not appealable, (3) the City will notify me of its acceptance of my participation in either the Voluntary Separation Program or Retirement Incentive Program, and (4) if the City rejects my election to participate in the Program, this request will automatically be rescinded.

I understand that if the City accepts my Separation or Retirement, I will attend a meeting when contacted by Human Resources and must sign the City's Separation Agreement and Release of All Claims. (A preview document is attached for review purposes, only). I further understand that if I decline to sign the Separation Agreement and Release of All Claims this request will automatically be rescinded. The City Manager will only consider employees who submit this letter by the April 10, 2009 deadline.

Signature

Date

Print Name

Department

Classification

Address

City

State

Zip Code

Phone Number

**THIS LETTER OF SEPARATION/RETIREMENT MUST
BE RECEIVED BY BARBARA SANTOS IN THE HUMAN
RESOURCES OFFICE,
1010 TENTH STREET, SUITE 2200, MODESTO, CA
NO LATER THAN 4:30 P.M. ON APRIL 10, 2009**