

Lump Sum Supplemental Compensation for Earned and Unused Sick Leave for Retirees

INSTRUCTIONS: Before completing this form, see NJAC4A:6-3.(1 through 4) concerning SCOR.

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NAME OF EMPLOYEE (Print or Type	2. DEPARTMENT OR AGENCY								
3. SIGNATURE OF EMPLOYEE	4. SOCIAL SECURITY NUMBER								
5. PRESENT MAILING ADDRESS (Street, City, State, Zip Code)			6. EMPLOYEE'S TITLE AT RETIREMENT Career Senior Executive Unclassified						
				Full Time Part Time %					
7. Salary at time of retirement: 8. Effective date of Retirement:			10. DATES OF EMPLOYMENT						
9. Name of Employee's Pension Systen OTHER: PENSION NUMBER:		from:							
11. TOTAL AVERAGE ANNUAL CO back from effective date of retireme				d payroll days	or 217 d	lays fo	r 10 month	employees, counting	
TITLE		PERIOD (Day, Month, Year)			Numbe	er of P	ayroll Days	s X Daily Rate = Amount	
		from: to:						\$	
		from:	to:					\$	
		from: to:						\$	
		from: to:						\$	
		from:	to:					\$	
		Total Days 2	?61 or	217	Total	Comp	pensation	\$	
12. AVERAGE DAILY RATE DURING FULL YEAR OF EMPLOYMENT: A. For 12-month employees \$ divide total compensation		13. UNUSED SICK LEAVE (When converting hours to days, round out figures to nearest quarter of day) A. Balance thru December 31,				D	AYS	14. AMOUNT (Item 13E X Item 12 divided by 2)	
(Item 11) by 261. B. For 10-month employees divide total compensation		(Employees earn 1.25 days per month) C. Total sick days accrued (A + B) D. Used calender year to effective date of retine the control of the contr			tirement			NOTE: Total payment NOT to exceed \$15.000	
(Item 11) by 217. 15. Sick leave information for UNCLASSIFIED) service or		•		leave time	e record	ls for last 5 ye	· ·	
A. Was there a fixed number of days an employee could earn and be gradited each was? How many?				ick leave records were main- Indicate month, day, and year)			ployees in these class titles, of leave that classified		
B. Was sick leave recorded in the same manner for all full time employees? YES NO Explain how recorded on reverse side. C. Are recorded concerning use of sick leave maintained? YES N			d former employ t the time of sep	to: former employee regain he time of separation? If YES, what types of leave and how much of each w granted? Explain variations from procedure for class employees. Use reverse side for explanations.			from procedure for classified		
C. Are records concerning use of sick leave m YES Explain how maintained on reverse side.		/If VEC ware there envis	imitations)	scribe on reverse)					
16. ● I CERTIFY that all statements	on this a	application are true and c			nowledg	ge and	d belief un	der penalty of perjury.	
Signature of Appointing Authority						_ Date	e:		
17. APPROVAL: Civil Service Commission						rm alon nsion a	ompleted ng with approval	Civil Service Commission Compensation/SCOR Unit P.O. Box 313	
Signature Date:						ter to	•	Trenton, NJ 08625	