Vacation Exchange Program for TMG

Application Form

Eligible Employees, as defined in the [Program Guide](https://hr.mcmaster.ca/app/uploads/2019/01/Vacation-Exchange-Program-Guide-1-46.pdf), may make a one-time application to exchange one week of their annual vacation entitlement for a 2% increase in base salary. This vacation exchange will reduce an Eligible Employee’s vacation entitlement on a permanent and ongoing basis until retirement.

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| **To be completed by the Employee**  |
| Employee ID:  |  |
| Employee Name:  |  |
| Email and Extension:  |  |
| Department:  |  |
| Declared Retirement Date: |  |
| Note: This date must be the first of a month. |

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| I am voluntarily applying for the Vacation Exchange Program for TMG. Subject to my meeting program eligibility requirements, I understand that I will receive a one-time increase of 2% in my base salary, my vacation entitlement will be reduced by one week on a permanent and ongoing basis until retirement, and I commit to retire within 3 years. I understand that, once approved, this application is irrevocable and that my Declared Retirement Date may not be later than three years in the future, as noted above.  |
| Signature of Employee:   | Date:  |

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| **Supervisor Approval and Information** |
| Immediate Supervisor  | Name:  |  |
| Title: |  |
| Mailing Address: |  |
| Email Address: |  |
| Date: |  |
| Signature: |  |
| Department Head  | Name:  |  |
| Title: |  |
| Mailing Address: |  |
| Email Address: |  |
| Date: |  |
| Signature: |  |
| Director of Administration (or equivalent) | Name: |  |
| Title: |  |
| Mailing Address: |  |
| Email Address: |  |
| Date: |  |
| Signature: |  |
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| Key Dates for Applicants  |
| The completed application deadline is  | By April 30 |
| Your application will be reviewed by Human Resources Services to confirm whether or not you meet the eligibility requirements of the program.  | You will be informed of the outcome by June 30th  |
| If approved, you will receive a one-time 2% increase in base salary  | Effective July 1 of the year in which you applied |
| If approved, your annual vacation entitlement will be permanently reduced by 1 week  | Effective the year following your application year and continuing until retirement |

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| Please send the completed application form to:Dejana Corovic, Total Rewardscorovic@mcmaster.ca |