ISAAC SCHOOL DISTRICT NO. 5



3348 West McDowell Road Phoenix, Arizona 85009-2416

Phone: 602-455-6700 Fax: 602-278-1693 Mario Ventura, Ed.D. Superintendent

Request to Participate in Phased Retirement

Employee Name:	Location/Department:
I am requesting permission to participate in F school year.	Phased Retirement with Isaac Schools for the
I can answer yes to the following:	
 and determined my retirement date with a large attached a copy of my current y have received an effective rating. I have met with Human Resources to reimbursement (if applicable). 	ment System to confirm my retirement eligibility
Employee Signature I approve this employee for Phased Retire	Date ement.
Supervisor Signature	 Date