INSERT DATE

NAME

ADDRESS

ADDRESS

Dear (NAME):

The (INSERT SCHOOL/DEPT) would like to thank you for your service to the University. I am sorry to inform you that effective (INSERT DATE) your position as (INSERT TITLE), position # (INSERT), is scheduled for elimination due to business necessity. (INSERT ADDITIONAL DETAILS/SUMMARY OF BUSINESS NEED). The purpose of this letter is to provide information, a timeline, and resources available to you during this process.

The University, through (School/Unit) human resources, will provide assistance to you to seek other employment. Your application in Jobs@ will immediately be identified as “internal hiring priority.” The internal hiring priority status provides you with preferential employment consideration for positions in which you meet the minimum qualifications and that you apply for at UVA.

Along with this letter you will receive a notice of layoff or placement form (attached). Please review this notice carefully and ask any questions you may have. During this pre-layoff period, defined as the period between (INSERT 60 DAY PERIOD DATES), you will receive a “Yellow Form” (Attachment A) which will afford you preferential hiring opportunities during this pre-layoff period at UVA and in other Executive Branch Agencies. If you are offered a placement, you are free to accept or decline the placement. If you decline a placement that does not require you to move or accept a reduction in pay, you will forfeit your rights afforded under the layoff policy. Contact (INSERT HR REP NAME AND TITLE) at (INSERT CONTACT INFORMATION) for assistance with your placement into another position at UVA.

If you are unable to secure another position at UVA or at another Executive Branch Agency by (INSERT DATE, 60 DAYS NOTICE), you will be placed on a leave without pay-layoff status.When you are placed on this status, you will receive the final notice of layoff form (Attached) and be given a “Blue Card”. The Blue Card provides you with preferential employment rights for 12 months from the date you were placed on the leave without pay-layoff status. The preferential employment rights pertain to vacant positions at UVA and in other Executive Branch Agencies that are in the same Role as your former position and for which you are minimally qualified. Additionally, the University will extend severance benefits to you. A detailed description of your severance options and benefits is included in the “Attachment A-1”.

Based on your years of service, you are eligible for transitional severance benefits under the **Workforce Transition Act (WTA)**. If you choose to retire under WTA, you will forfeit your layoff rights, but you will be eligible for an enhanced retirement credit. Contact Susan Harris, Lead Benefits Counselor in the UVa Benefits Department at 434-924-6954 or sch3c@virginia.edu for more information.

Please let me know if you have questions about your options and benefits.

Sincerely,

Manager

Manager Title

**ATTACHMENT A-1: EXPLANATION of SEVERANCE, BENEFITS, RETIREMENT OPTIONS**

The purpose of this attachment is to provide an overview of the severance options and benefits that will be afforded to you should your status be changed to leave without pay-layoff as a result of the elimination of your position.

***Payout of Accrued Leave Time***

When you are placed on the leave without pay-layoff status, there are several options for you to consider as it pertains to the leave balances you accrued as of (INSERT DATE).

1. You may request an immediate payout of the applicable leave balances.
2. You may request to not payout your leave balances during the leave without pay-layoff period. If you secure another salaried job at UVA or another Executive Branch Agency during (INSERT LEAVE WITHOUT PAY DATE RANGE), your leave balances will be reinstated. **Please Note**: If you elect to not receive a payout of your leave balances when you are initially placed on the leave without pay-layoff status, you can request to have your leave paid out at a future date during this period.

***Option 1- Severance Pay & Benefits***

As of (INSERT DATE), when you are placed on leave without pay-layoff status, you are entitled to severance pay. Based on your years of service, you are entitled (INSERT WEEKS) of severance pay. You would receive one weeks’ pay, (INSERT $), based on your current annual salary, for each week you are on Leave Without Pay-Layoff, up to a total of (INSERT # OF WEEKS, SEE SEVERANCE POLICY), or until you begin working in another job in the state system, whichever comes first. Therefore, if you are on Leave without pay-layoff for the full (INSERT) weeks, you would receive total severance pay in the amount of (INSERT $).

During the time you are on Leave Without Pay- Layoff, you are entitled to maintain certain benefits for up to twelve (12) months. The University will make its contribution to your group life insurance for the period you are on Leave Without Pay-Layoff. (Contact your Benefits Department to determine if you are eligible to continue in other payroll-deduction programs.) As UVA is self-insured and does not participate in the State Health Plan, State policy does not require UVA to continue the employer portion of your health insurance premium. UVA, however, will provide the employer portion of your premium for the period you are on Leave Without Pay-Layoff. You will only be responsible for the employee share of the monthly premium. For the period you are receiving severance pay, your portion of the cost of these benefits will be deducted from your severance check. Once your severance pay has ended, you will be billed by the University for your portion of the benefit costs. Should you not find employment within the twelve (12) month layoff period, you will be eligible to continue your medical coverage at your sole expense with the University’s health plan for a period of eighteen (18) months under the provisions of COBRA.

**OPTION 2: *WORKFORCE TRANSITION ACT – INVOLUNTARY SEPARATION***

As an alternative to being placed on Leave Without Pay-Layoff status, we can offer you the ability to retire under the Involuntary Separation provisions of the Workforce Transition Act (“WTA”). To determine the benefits available to you under the WTA please contact Susan Harris, Lead Benefits Counselor in the UVa Benefits Department at 434-924-6954 or sch3c@virginia.edu for more information.

Please note: if you retire under WTA, you would retain no preferential hiring rights, nor would the State or any of its agencies have any further obligation to you with respect to employment. Please note further: you must choose to exercise the WTA option prior to the time you are placed on Leave Without Pay-Layoff on *INSERT DATE*. Once your status has been changed to Leave Without Pay-Layoff, this WTA option will be withdrawn and will no longer be available to you. Please note further, it is to your advantage to notify Human Resources of your intent to elect the WTA option as soon as possible, as it takes approximately three (3) months for the State to process your paperwork and for your retirement payments to be received.

**PLEASE CHOOSE ONE OF THE FOLLOWING OPTIONS AND RETURN TO (INSERT HR CONTACT NAME) ON OR BEFORE (INSERT DATE):**

\_\_\_\_\_ I elect to receive weekly Severance Pay when I am placed on Leave Without Pay-Layoff Status. I understand I am eligible for a (weeks) severance pay and that all severance pay and benefits as stated above will cease if I accept a position with a State Agency.

\_\_\_\_\_ I elect to retire under the provisions of the Workforce Transition Act, as stated above. I understand that the University will purchase the requisite years of service credit toward my retirement. I understand further that it will take approximately three (3) months for my benefits to be received and that I will not be eligible to receive severance pay while waiting to receive my benefits.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***EMPLOYEE NAME*** Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness Date

**Attachment A** – PRINT ON YELLOW PAPER

Commonwealth of Virginia *This is not a state Application for Employment*

Department of Human Resource Management

**EXECUTIVE BRANCH INTER-AGENCY PLACEMENT SCREENING FORM**

DATE CARD ISSUED EFFECTIVE DATE OF LAYOFF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Issuing Agency: University of Virginia—Agency 207 Signature of HR Officer:

|  |  |  |  |
| --- | --- | --- | --- |
| Position Title/NumberApplied for: |  | Name ofAgency: |  |
|  |
| **PART I – PERSONAL DATA** |
| NAME |  |  |  |  |  |  |
|  | LAST |  | FIRST |  | MI |  |
| ADDRESS |  |  | PHONE |
|  |  |  | work  | ( ) |  |
| CITY |  | STATE |  | ZIP |  | home | ( ) |  |
| ID# |  |  | E-MAIL ADDRESS |  |  |
|  |
|  |
| **PART II – EDUCATIONAL QUALIFICATIONS** |
| High School Grad or GED – Year completed  |  |  |
|  |  |  |
| DEGREE | COMPLETED(Y/N) | INSTITUTION | MAJOR AREA OF STUDY | DATES ATTENDED(mm/yy – mm/yy) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |
| **PART III – EMPLOYMENT HISTORY** (See Part IV on reverse side for description of job experience) |
| JOB I (most recent)POSITION TITLE |  |  | EndSalary |  |  | Years |  |  |
| Employer - Agency |  |  |
|  |  |  |
| JOB IIPOSITION TITLE |  |  | EndSalary |  |  | Years |  |  |
| Employer – if VA state employee, give pay band/grade |  |  |
|  |  |  |
| JOB IIIPOSITION TITLE |  |  | EndSalary |  |  | Years |  |  |
| Employer – if VA state employee, give pay band/grade |  |  |
|  |  |  |
| **PART IV – JOB EXPERIENCE** |
| Experience – Job I |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Experience – Job II |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| Experience – Job III |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |