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Reynolds School District Administration Offices 1204 NE 201st Avenue Fairview, OR 97024 (503) 661-7200 • fax (503) 667-6932

Work Share/Federal Pandemic Unemployment Compensation (FPUC) Opt-out Application

certify that I am an employee of RSD that:

Print Name	
 Has been employed continuously (and not on a limit or more/day) for the past 6 months or part-time (les months. Is not a limited term employee or a substitute employee will not be on leave or taking leave during the furle. Has not recently exhausted unemployment insurance. 	ss than 6 hours/day) for the past 12 byee. bugh weeks.
Although I am eligible to participate in the RSD Work Sha opt-out due to the reason below. As an eligible staff member to take off the contractually agreed upon work day/s and us	er, I understand that I will be required
 ☐ I am currently completing a mortgage or home refinance documentation) ☐ I submitted my intent to retire at the end of the 2019-20 Date submitted retirement notification: Other (please specify): 	
I understand that my application will be reviewed and I will be notified whether my opt-out request has been approved.	
Employee Signature	Date
Application should be submitted with back-up documen	ntation to avoid delay in processing.

