**FACULTY PAY OPTION ELECTION FORM**

Please indicate below which pay option you prefer for the 2017-2018 academic year.

\_\_\_\_\_\_\_\_\_\_ 9 month pay option

\_\_\_\_\_\_\_\_\_\_ 12 month pay option

After you have exercised this election, please be advised that all pay for the future academic years will be paid in the same manner unless you notify the Human Resource office in writing that you wish to receive your pay over a different pay option prior to the commencement of the ensuing academic year.

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Faculty Member Signature Date

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Printed Name