Service (EX) Unit - Sample Indefinite Layoff Letter

[Department Letterhead]

Proof of Service – Personal Delivery

[Date] *NOTE TO DEPARTMENT (to be removed from letter): Whenever possible, an employee will receive at least 30 calendar days advance notice; if less than 30 calendar days’ notice is given, the employee shall receive pay in lieu of notice in accordance with* [*Article 15.E.2.b.*](https://ucnet.universityofcalifornia.edu/labor/bargaining-units/ex/docs/ex_2008-2012_15_layoff.pdf) *of the Patient Care Unit Agreement. In the event of an anticipated indefinite layoff of 5 or more full-time equivalent (FTE) employees on the same effective date in the same layoff unit, the University will, to the extent possible, give 45 calendar days advance notice to AFSCME.*

To: [Employee Name]

[Title, Department Name]

From: [Supervisor Name]

[Title, Department Name]

Subject: Notification of Indefinite Layoff

I regret to inform you that due to (budgetary/operational considerations/lack of work/reorganization) it is necessary to place you on indefinite layoff effective [date]. Your last day on pay status will be [date].

In accordance with Article 15, Layoff and Reduction in Time of the UC-AFSCME Agreement covering employees in the Patient Care Unit, career employees who receive notice of indefinite layoff may file an election for either Option 1 or Option 2 listed below. Please note that your selection, once made, is irrevocable.

**Option 1: Layoff with Full Severance Pay in Lieu of Recall and Preferential Rehire Rights**

*NOTE TO THE DEPARTMENT (to be removed): employees with less than five (5) years of service* shall receive two (2) weeks (ten workdays) of base salary. Employees with five (5) or more years of service shall receive one week (5 workdays) of base salary for each full year of service up to a maximum of sixteen (16) weeks.

According to the University’s calculations, you have \_\_\_\_years of University service. Based on your years of service, you are eligible for \_\_\_\_\_weeks of severance pay in the amount of $\_\_\_\_\_\_\_\_\_ , to be paid as a lump sum. Please note, in accepting this option, you will be breaking your service with the University and will be waiving your rights to preferential rehire and recall. If you are rehired and laid off again, your seniority for purposes of this article will be based only on service credit you earned after the break in service.

Please note that a selection of Option 1 must be submitted in writing within 14 calendar days of the receipt of layoff notice. If no written selection of Option 1 is submitted within 14 days, you will have selected Option 2 by default.

**Severance Repayment upon Re-employment:** Please note that if you receive severance pay under the Service Unit layoff provisions and you are rehired to a career position at the same or higher salary and at the same percentage of time as the position from which you were laid off, you will be required to pay back the portion of severance pay received that exceeds the number of weeks you were on layoff status. Before returning to work you must repay the excess severance in full or sign a repayment agreement as a condition of employment.

## **OR**

**Option 2**: **Layoff with Preferential Rehire and Recall Rights**

*NOTE TO THE DEPARTMENT (to be removed from letter): Employees with less than five years of service shall retain preferential rehire status eligibility for one year. Employees with five years but less than ten years of service shall retain preferential rehire status eligibility for two years. Employees with ten or more years of service shall retain preferential rehire status eligibility for three years.*

**Preferential Rehire.** You will have preferential rehire status in this and other departments at the Riverside campus for a \_\_\_\_\_ year period beginning [effective date of layoff action]. This means you will have preferential rehire consideration for active, vacant career positions in the Patient Care Bargaining Unit for which you are fully qualified. However, these positions must be in the same class and have the same or lower salary range maximum as the position from which you were laid off. They must also be at the same or lesser percentage of time as the position from which you were laid off. Employees who are eligible for preferential rehire may exercise this right immediately after receiving written notification of layoff. Your preferential rehire rights commence with your election of Option 2. An employee seeking preferential rehire placement is responsible for filing a timely job application and self-identifying to the hiring authority and Human Resources as a preferential rehire candidate.

**Recall Rights.** You will have the right to be recalled in order of seniority in this department for a three (3) year period beginning [effective date of layoff action]. As with preferential rehire, right to recall applies to active, vacant career positions in the Patient Care Bargaining Unit for which you are qualified. Once again, such positions must be in the same class and at the same or lesser percentage of time as the position from which you were laid off. (***IF APPLICABLE ADD*:** Recall rights also apply to positions in a lower classification at the same or lesser percentage of time than the position you are being laid off from, provided you previously held a career position in that lower classification in this department in the Patient Care bargaining unit).

Under Article 15.H.1., you have fourteen (14) calendar days from receipt of this letter to elect either Option 1 or Option 2. Your election must be in writing and is irrevocable. Please **indicate your election by returning to me the completed EX Employee Election for Severance in Indefinite Layoff, no later than \_[date]\_\_ [14 days from date of notice]**. If you do not affirmatively choose Option 1 (full severance pay in lieu of preferential rehire and recall rights) during the 14 calendar day period, you will be considered to have elected Option 2 (preferential rehire and recall rights).

If interested in other career opportunities at UC Riverside, please contact the Talent Acquisition and Diversity Outreach office in Human Resources via email at careers@ucr.edu or at (951) 827-3575, for information on current job openings and application procedures. You may also visit the UCR Jobs website at <https://jobs.ucr.edu>. Applicants exercising rights to preferential rehire should promptly notify Talent Acquisition and Diversity Outreach of the vacant career position(s) for which they would like to be considered.

If you have questions regarding UC-sponsored insurance plans, retirement savings plans, or are considering retirement from UC, please contact the Benefits Office in Human Resources at (951) 827-4766, or via email at benefits@ucr.edu, to discuss your options. Additional resources are presented to you in the enclosed Resources for Employees who Have Received Notice of Layoff.

Below are some important benefits considerations associated with an indefinite layoff:

* Your medical, dental and vision insurance coverage will end on [enter last calendar day of separation month], provided you have paid any required employee portion of these premiums. Information on the effect of your layoff on any health insurance plans you are enrolled in through the University will be forwarded to your home. Included will be information on how to continue coverage under those plans. You will be eligible to purchase coverage under COBRA (The Consolidated Omnibus Budget Reconciliation Act of 1985: https://www.dol.gov/general/topic/health-plans/cobra) for a period of up to 18 months. You will receive a COBRA election packet from WageWorks within 4 weeks of your separation date.
* UC Retirement Savings Program information concerning any funds you may have in the Deferred Contribution Plan, the Tax-Deferred 403(b) Plan, and the 457(b) Deferred Compensation Plan, can be obtained by contacting Fidelity Retirement Services at 1-866-682-7787 or online at <http://netbenefits.com/>.
* If you are vested in the University of California Retirement Plan (UCRP) due to having five or more years of UCRP Service Credit, and you are under age 50, you may be eligible to elect inactive membership. If you are vested and you have reached the minimum retirement age (50 or 55 depending on your UCRP membership classification and member tier), you may be eligible to elect retirement income or a lump-sum cash out. To access your retirement information, please visit the UC Retirement At Your Service (UCRAYS) website at <https://retirementatyourservice.ucop.edu>. To discuss your retirement plan options with a retirement benefits representative, please contact the Benefits Office at (951) 827-4766 or the UC Retirement Administration Service Center (RASC) at 1-800-888-8267 or online at: <https://ucnet.universityofcalifornia.edu/contacts/rasc.html>. *Please note that if you decide to retire, the effective date of your retirement must be within 120 days of separating from UC employment to continue any UC benefits you are eligible for as a retiree.*

As an employee on layoff status, you may be eligible to receive unemployment insurance benefits. To determine your eligibility you must file a claim at a local office of the State of California Employment Development Department (EDD). You may also file a claim by calling EDD at 1-800-300-5616 or via the Internet at [www.edd.ca.gov](file:///C%3A/Users/paulwood/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/CCETE25V/www.edd.ca.gov). Additionally, a UCR Human Resources representative is available at (951) 827-3641 or at employee.relations@ucr.edu to provide you with information regarding considerations in determining eligibility.

I would like to take this opportunity to express the department’s appreciation for your years of dedicated service. You have been a valuable member of [department], and your contributions have been greatly appreciated.

If you have questions regarding your transition from University employment, please contact [name of HRBP], [title], [department], at 951-827-[XXXX ].

Enclosures: EX Employee Severance Election Form

Proof of Service Form

Resources for Employees who Have Received Notice of Layoff

cc: HR - Employee & Labor Relations

 HR -Talent Acquisition & Diversity Outreach

 HR - Benefits

 Organizational Unit HR Business Partner

 Department Personnel File

AFSCME (1280 Palmyrita Avenue, Suite F, Riverside, CA 92507)

***NOTE TO DEPARTMENT (to be removed from letter):*** *The Patient Care Unit contract requires that the University provides concurrent notice of this action to AFSCME. Therefore, departments must provide a copy of the above letter to Employee and Labor Relations along with the proof of service form, at the time the employee is notified.*