

IFO Retrenchment/Reassignment List Procedures

1. A copy of the attached *Academic Areas Designation Form* (“Designation Form”) and *Appendix B* of the IFO Agreement shall be given to tenured faculty members who receive notice of layoff while employed within the Inter Faculty Organization (“IFO”) bargaining unit.
2. Retrenched tenured faculty members will be asked to use the Designation Form to designate up to three (3) academic areas from Appendix B of the IFO Agreement for which they wish to receive notices of vacancy throughout the seven (7) Minnesota State Universities. Retrenched faculty should complete and submit the form to the Human Resources office of the university from which they are being retrenched.
3. Upon receipt, the University HR office will complete the portion of the Designation Form dealing with the date of the lay-off notice and the effective date of the layoff. A copy of the completed Designation Form will be sent to the affected faculty member and the Office of the Chancellor (“OOC”). In addition, a copy will be placed in the faculty member’s personnel file.
4. The OOC will post designation data received from universities on the official system-wide IFO Retrenchment/Reassignment List (“List”) maintained on the OOC website. Due to data practices considerations, the OOC List website will be password protected and available only to authorized personnel. The IFO will be provided a copy of the current List upon written request.
5. Retrenched tenured faculty may update their designation of academic areas once each year by submitting a completed *Academic Areas Designation Change Form* (“Change Form”) (attached) to the HR office of the university from which they were laid off.
6. Change Forms may be submitted only during a 30 business day window period lasting from 15 business days before to 15 business days after the date of a faculty member’s lay-off notice. Changes of contact information may be filed at any time. *(Note that the window period for updating academic designations is based on the date of the notice, not the effective date of the lay off.)*
7. During each update window, a faculty member may request to substitute one academic program area for another. *(Note that requested substitutions will not be processed unless a faculty member identifies both the area to be added and the area to be deleted.)*
8. During each update window, a faculty member may also add one academic area to their designation data on the List.

9. Change Forms received by a university HR office will be signed by the campus HR director. A copy of the completed form signed by the HR director will be sent to the affected faculty member and the OOC. In addition, a copy will be placed in the faculty member's personnel file.
10. The OOC will use Change Form data received from universities to update the official system-wide List maintained on the OOC website.
11. Prior to publishing vacancy notices for any faculty positions in the IFO unit, universities will check the List to determine if any of the vacancies are in academic areas designated by faculty on the List.
12. If there are any *probationary vacancies* in academic areas designated by faculty members on the retrenchment list, the hiring university will mail notice of the relevant vacancies to the designating faculty members not less than three (3) calendar weeks prior to disseminating the vacancy notice within MnSCU or in local or national publications.
13. If there are any *fixed term or adjunct vacancies* in academic areas designated by faculty members on the List, the hiring university will mail notice of the relevant vacancies to the designating faculty member on or before the day the vacancy notice is disseminated within MnSCU and before it is disseminated in local or national publications.
14. Each university that retrenches tenured faculty members shall be responsible for mailing those faculty members copies of the *MnSCU Employment Opportunities Bulletin* as they are issued. Faculty members on the List shall continue to receive copies of the *MnSCU Employment Opportunities Bulletin* until the faculty member's reassignment rights expire and his/her name is removed from the List.
15. Each university that notifies a faculty member on the List of a vacancy as described in these guidelines will also include a letter describing the contractual reassignment process and a copy of the *Request for Reassignment Form* ("Request Form") (attached). In cases where a single university sends more than one notice of vacancy at a time, only one set of the enclosures needs to be sent.
16. Faculty will have three (3) calendar weeks from the date the notice of vacancy was mailed to them to indicate interest in a position and to forward the application materials requested in the notice to the hiring university. A completed copy of the Request Form should accompany the application materials.
17. A copy of the completed Request Form shall be provided to the faculty member and a copy shall be placed in the faculty member's personnel file.
18. The HR office of a hiring university will notify the OOC when a faculty member accepts or rejects a reassignment offer.

19. If a vacant position is temporary or less than full-time, a faculty member may refuse an offer of reassignment without affecting his or her reassignment/recall rights. A faculty member may also accept reassignment to a position other than a full-time tenured position in the IFO bargaining unit without affecting his/her reassignment/recall rights.
20. If a faculty member rejects reassignment to a full-time probationary/tenured position for which s/he has applied, the faculty member waives all further reassignment rights and the OOC will remove the faculty member's name from the List.
21. If a faculty member accepts reassignment to a full-time tenured position in the IFO bargaining unit, the faculty member's reassignment rights expire and the OOC will remove the faculty member's name from the List.
22. Faculty reassignment rights expire at the conclusion of three (3) years from the effective date of the faculty member's layoff. *(Note that expiration of reassignment rights is keyed to the effective date of the layoff, not the date of the layoff notice.)* Upon expiration of a faculty member's reassignment rights, the OOC will remove the faculty member's name from the List and will notify the faculty member by mail of reason for removal and the date of removal.

Academic Areas Designation Form

Designate up to three (3) academic areas listed in Appendix B of the IFO Agreement in which you are qualified for and request reassignment. If you have questions about selection of academic areas, contact the Human Resources Office of the University where you were employed at the time you received notice of retrenchment.

Return the completed form to the Human Resources Office of the university from which you were retrenched.

1. _____
2. _____
3. _____

The University's Human Resources Office will complete the bottom right section of the form and provide copies of the final document to you, your personnel file, and to the Office of the Chancellor, where the data will be input to the official Retrenchment List on the OOC web-site.

You may update your selected three (3) program areas each year during the 30 business day window lasting from fifteen (15) business days before to fifteen (15) business days after the anniversary date of the date of your lay off notice (***not the anniversary of the effective date of your lay off***). Changes may be made by substituting one academic area for another. You may also *add* one academic program area annually. Changes in contact information can be made at any time.

Faculty Member's Name

Faculty Member's Signature

Date

Contact information for purposes of notices of vacancies/reassignment:

Address

E-mail Address

To be completed by HR Office:

Date of layoff notice: _____

Effective date of layoff: _____

HR Director Signature: *Date:*

Telephone Number

c: Faculty member
Personnel file
OOC Human Resources

Academic Areas Designation Change/Addition Form

You may update your designated program areas each year during the 30 business day window lasting from fifteen (15) business days before to fifteen (15) business days after the anniversary date of the date of your lay off notice (*not the anniversary of the effective date of your lay off*). Changes may be made by substituting one academic area for another. You may also add one academic program area from Appendix B annually during the window period. Changes in contact information may be made at any time. Return the completed form to the Human Resources Office of the university from which you were retrenched.

Section A: Request to change an academic area:

I request the following change(s) in my designated areas for purposes of reassignment under the IFO Agreement. (*Note that in order to make the change, you must indicate the academic area you want to add, and the area that you would like to delete. There will be no change processed unless both lines below are completed.*)

Add: _____ Delete: _____
Add: _____ Delete: _____
Add: _____ Delete: _____

Section B: Request to add an academic area:

I request the addition of the following academic area to my designated areas for purposes of reassignment under the IFO Agreement. I understand that I can add one academic area annually during the window period.

Academic area that I would like to add:

1st Anniversary _____
2nd Anniversary _____
3rd Anniversary _____

Name of Faculty Member (please print)

Signature of Faculty Member

Date

Changes, if any, in contact information:

Address

E-Mail Address

Telephone

Signature of Human Resources Director

Date

c: Faculty member
Personnel file
OOC Human Resources

IFO Request for Reassignment Form

IFO Retrenchment/Reassignment Process

In accordance with Article 23, Section E (Reassignment) of the Agreement Between the Minnesota State Colleges and Universities (MnSCU) and the Inter-Faculty Organization (IFO), I hereby request reassignment to the following position vacancy:

List Vacancy: _____

List University: _____

Name (printed): _____

Signature: _____

Date _____

Mailing Address: _____

City: _____

State: _____ Zip: _____

E-mail: _____ Telephone: _____

Please return this form, along with application materials, to the following:

_____ **[insert campus contact]** _____
