



Faculty Voluntary Separation Incentive Program (VSIP) 2025 Application Withdrawal Form

Please complete, sign and hand deliver this form to the Office of the Executive Vice President & Provost, Voluntary Separation Incentive Program, Attn: Dr. David S. Jackson, 3835 Holdrege Street, Lincoln, NE 68583, on or before the close of business (5:00 p.m. CST) on January 5, 2026.

Application Withdrawal Date: _____

EMPLOYEE INFORMATION

Employee Name: _____

Personnel Number: _____ **NUID:** _____

Campus: ☐ UNK ☐ UNL ☐ UNL-IANR ☐ UNMC ☐ UNO ☐ UNOP/UNCA

Title: _____ **Position Number:** _____

Employee Signature: _____