

RESIGNATION AND RELEASE  
FOR IMMEDIATE BENEFITS

I, the undersigned, **[First Name, Last Name]**, of the City of **[City]**, County of **[County]**, State of **[Wisconsin]**, hereby irrevocably resign my current position as **[Title Professor]** of **[Subject]** in the **[College/School]** of **[College/School Name]** at Marquette University in Milwaukee, Wisconsin, effective as of **[Effective Date]**, for the following consideration:

I will receive a gross payment of **[Dollar amount]** Dollars (\$ **Insert amount**), less taxes and withholdings as required by law for the release of my tenure rights. I will receive this payment in two (2) separate equal installments, the first payable by June 30 and the second payable on or about January 31 (or the next business day thereafter) of the following calendar year respectively. These payments will not be eligible for the Marquette matching contribution to the 403(b)-retirement fund.

All other benefits, except those specifically identified in this document and those offered generally to Marquette retirees, will cease. I understand and agree that retiree benefits are offered by Marquette under other written policies and that receipt of any retiree benefits is contingent upon my eligibility under the applicable policies. I understand and agree that Marquette reserves the right to modify or terminate the retiree benefits offered by Marquette from time-to-time. I will be allowed to choose from available retiree health, dental and vision plans offered by Marquette during each year's annual enrollment period until I am eligible for Medicare.

Further, I hereby release and forever discharge Marquette University, its successors and assigns, from all actions, causes of action, claims and demands whatsoever, based upon tenure rights, contract of employment or related in any way to my employment by the University. I further acknowledge that this Resignation and Release is subject to and incorporates by reference the Tenure Buyout Policy dated September 1, 2016, as amended.

I further acknowledge that no additional promise or agreement has been made as consideration for this Resignation and Release and that my signature has not been induced by any representatives of the parties released, or any anyone on their behalf. This Resignation and Release contains the entire agreement relating to my resignation.

IN WITNESS WHEREOF, the parties have executed this Agreement as of **[Insert Date]** Day of **[Insert Month]**, 20**[Insert Year]**.

Faculty Member:

MARQUETTE UNIVERSITY

\_\_\_\_\_

By: \_\_\_\_\_

Dr. Daniel J. Myers  
Provost

Residing at: \_\_\_\_\_  
\_\_\_\_\_