

**ELECTION FORM
EMPLOYEE OPTION TO REMAIN IN SHRA STATUS OR TO CONVERT TO EHRA STATUS**

Employee Name	Employee ID
Position #	Proposed Effective Date

Proposed Position Action	From Current SHRA Position	To Proposed EHRA Position
Classification Title		
Annual Salary		

I, _____ (*print name*), have received notice that my current SHRA position listed above is eligible to change from one that is subject to the North Carolina Human Resources Act (SHRA status) to one that is exempt from the Act (EHRA status).

I understand that I have the option to retain my current SHRA status for the duration of my employment in this position or change to EHRA status. I further understand that I have until _____ (*date*) to make my decision, and **I understand that, if I choose to change to EHRA status, this decision is irrevocable for the duration of my employment in this position.**

I understand that, even if I elect to retain my current SHRA status during the implementation of this opportunity, my institution, at its discretion, may provide additional opportunities for me to choose to retain my current SHRA status or change to EHRA status, and I further understand that if I still elect to retain my current SHRA status after these opportunities have been exhausted, then my decision will be irrevocable for the duration of my employment in this SHRA position.

I have received both a “Frequently Asked Questions” document regarding this position/classification conversion and a “Comparison of Employment Policies for SHRA and EHRA Non-Faculty Employees” document, which outlines certain differences in terms and conditions of employment between SHRA and EHRA employment, including:

- Methods of calculating compensation;
- Statutorily-mandated and other employer-provided benefits; and
- Policies and procedures governing non-disciplinary discontinuation of employment; discharge or other disciplinary action; and the consideration/resolution of grievances.

After careful consideration of all the information I have received and reviewed, I hereby make the following election:

- I elect to exercise my option at this time to retain SHRA employment status in the position I now occupy.
- I elect not to exercise my option to retain SHRA employment status in the position I now occupy and choose to have my position and my employment convert to EHRA status.

Employee Signature

Date

Employee’s Supervisor Signature

Date

cc: Human Resources