

Exhibit B

Wright State University 2016 Voluntary Retirement Incentive Program (VRIP) Indication of Interest Form

I, _____, (Soc.Sec. # _____) hereby indicate interest to participate in the Wright State University 2016 Voluntary Retirement Incentive Program (hereinafter "Plan") and receive the benefits as provided in said Plan.

In exchange for such benefits, I acknowledge I have read and agree with the terms of the Plan and Exhibit B. As a condition of my participating in the Plan:

- (1) I hereby agree to retire from Wright State University effective _____, **20**____ (or an alternate Exit Date determined by the University based on operational and educational needs).
- (2) I agree to execute the Release and Waiver of Claims Agreement (Exhibit B) in the form attached to the Plan and to deliver to Human Resources no later than 4:30 p.m. EST on August 15, 2016.

I acknowledge that I am making this election under my own free will, with no coercion or duress having been applied to me by anyone. I acknowledge that my resignation makes me ineligible for unemployment compensation benefits and I shall not ask for such benefits.

I also acknowledge the University and/or Board of Trustees reserves the right to offer or not offer a similar plan in the future, without obligation to those electing this Plan.

I also acknowledge that the University advised me to consult with an attorney and an accountant prior to signing this agreement.

Employee Signature

Dated: _____

Receipt Acknowledged by Human Resources of the University:

Exhibit C

Wright State University 2016 Voluntary Retirement Incentive Program Release and Waiver of Claims Agreement

This Release and Waiver of Claims Agreement (the "Agreement") is executed by and between _____ on his/her own behalf and on behalf of his/her heirs, executors, administrators and assignees (collectively, the "Employee") and Wright State University (the "University").

WHEREAS, the Employee is an Eligible Employee who may become entitled to receive certain severance incentive payments in accordance with the terms of the Wright State University 2016 Voluntary Retirement Incentive Program (hereinafter "VRIP" or "Plan"); and

WHEREAS, the Employee has indicated that he or she is desirous of becoming a Participant in the Plan; and

WHEREAS, as a condition of the Employee becoming a Participant in the Plan, the Employee is required to enter into this Release and Waiver of Claims Agreement no later than August 15, 2016; and

WHEREAS, the Plan is being offered to meet operational and budgetary needs of the University. The VRIP is offered to Wright State University employees meeting the VRIP eligibility criteria as identified in the Plan document, and is not a fringe benefit.

NOW, THEREFORE, IT IS AGREED by and between the Employee and the University as follows:

(1) The Employee by signing this Release and Waiver of Claims Agreement hereby affirms his or her decision to become a Participant in the Plan by (i) agreeing to retire or resign from employment as an Employee of Wright State University effective September 30, 2016 (for all eligible staff) and December 31, 2016 (for all eligible faculty) or an alternate Exit Date determined by the University based on operational and educational needs and (ii) certifying that he or she will commence payment of benefits under the applicable state retirement program (State Teachers Retirement System ("STRS"), Ohio Public Employees Retirement System ("OPERS"), Ohio Public Employees Retirement System-Law Enforcement ("OPERS-LE") or Alternative Retirement Plan (ARP), as applicable).

(2) To the fullest extent permitted by law and only to the extent permitted by law, the Employee, in consideration of the University's promises under the Plan, waives, releases and forever discharges the University, the University's Board of Trustees, individual Board members, both past and present, the University's past and present administrators, employees, agents, and representatives from any and all claims, actions or suits arising from, relating to, concerning or touching upon his/her employment with the University or the ending of his/her employment with the University, so long as such claims are able to be waived under governing law, including but not limited to:

(A) Any claim, action or suit alleging that he/she was illegally or improperly forced to resign his/her employment with the University;

(B) Any grievance, claim, action or suit alleging that the University breached any provision of its policies, procedures, employment agreements or collective bargaining agreements;

(C) To the extent such claims may be waived under the law, any claim, action or suit alleging that the University illegally discriminated against him/her in violation of any state or federal law or constitutional provisions, including any claim under Title VII of the Civil Rights Act of 1964, 42 USC §2000e, et seq., 42 USC §1983, and Ohio Revised Code Chapter 4112;

(D) Any claim, action or suit alleging that the University discriminated against him/her on the basis of his/her age in violation of the Age Discrimination in Employment Act of 1967, as amended, 29 USC §621, et seq., including any claim under the "Older Workers Benefit Protection Act" and Ohio Revised Code Chapter 4112;

(E) Any claim, action or suit alleging that the University violated the employee's rights;

(F) To the extent such claims may be waived under the law, any claim, action or suit seeking monetary relief or any personal right of recovery of any kind in a lawsuit brought on his/her behalf by any local, state or federal administrative agency would have jurisdiction alleging that he/she was improperly separated, treated or discriminated against as an Employee of the University;

(G) Any claim, action or suit over which any state or federal court would have jurisdiction, including, but not limited to, any claim of mental and/or physical injury; damage to or loss of personal reputation, defamation, intentional infliction of emotional distress or violation of constitutional rights;

(H) Any claim, action or suit for salary, fringe benefits and/or other costs, expenses or attorney fees; and

(I) Any taxes to any government entity that are owed on behalf of the Employee. The Employee acknowledges and accepts any tax and Medicare consequences and liability resulting from the Plan as his/her personal liability.

Exclusively as the Agreement pertains to the Employee's release of claims under the Age Discrimination in Employment Act ("ADEA"), the Employee, pursuant to and in compliance with the Older Workers Benefit Protection Act: (i) is advised to consult with an attorney prior to executing this Agreement; (ii) is afforded a period of forty-five (45) calendar days to consider the Agreement; and (iii) may revoke the Agreement during the seven (7) calendar days following its execution. The Employee's knowing and voluntary execution of the Agreement is an express acknowledgment and agreement that the Employee had the opportunity to review the Agreement with an attorney if he/she so desired; that Employee was afforded forty-five (45) days to consider the Agreement before executing it (even if the Employee voluntarily chose to sign the Agreement prior to the expiration of the 45-day period); that Employee agrees the Agreement is written in a manner that enables him/her fully to understand its contents and meaning; and that Employee is being given seven (7) days to revoke the Agreement.

(3) Notwithstanding the foregoing, the Employee does not hereby release any claims that may not be waived under the law, including but not limited to the right to participate in an administrative agency proceeding, and does not waive any claims that may arise with respect to the operation and administration of this Plan after the date of his or her retirement or termination of employment. After the Employee's retirement or termination of employment under the Plan, the Employee shall be permitted to take any action that is permitted under applicable law to enforce the terms of the Plan and Employee's rights thereunder.

(4) THIS AGREEMENT MAY BE REVOKED BY THE EMPLOYEE BY SO NOTIFYING THE PLAN ADMINISTRATOR AND HUMAN RESOURCES OF THE UNIVERSITY, IN WRITING, WITHIN SEVEN (7) DAYS FROM THE DATE THE EMPLOYEE SIGNS THIS AGREEMENT. If this Agreement is not so revoked, it shall become effective, enforceable and irrevocable. There is no obligation of the University to make any payments prior to expiration of the revocation period.

(5) The Employee acknowledges and understands that "Eligible Employees" are defined utilizing the STRS/OPERS/Alternative Retirement Plan eligibility standards (as applicable based on the Employee's participation in such program) as follows:

- The State Teachers Retirement System, or STRS, defines retirement eligible, as follows:
 - For participants in the Defined Benefit Plan: At any age with 31 years of service or age 65 with five years of service for an unreduced retirement benefit, and at any age with 30 years of service, age 55 with 26 years of service or age 60 with five years of service for a reduced retirement benefit.
 - For participants in the Defined Contribution Plan: At age 50 with no additional service requirement for a retirement benefit.
- The Ohio Public Employees Retirement System, or OPERS, defines retirement eligible as follows:
 - For participants in the Defined Benefit Plan: At any age with 30 years of service or age 65 with five years of service for an unreduced retirement benefit, and at age 55 with 25 years of service or age 60 with five years of service for a reduced retirement benefit.

- For participants in the Defined Contribution Plan: At age 55 with no additional service requirement for a retirement benefit.
- The Ohio Public Employees Retirement System-Law Enforcement, or OPERS-LE, defines retirement eligible as follows:
 - At age 45 with 25 years of service or at age 62 with 15 years of service for an unreduced retirement benefit.
 - At age 52 with 15 years of service for a reduced retirement benefit.
- The Alternative Retirement Plan, or ARP, defines retirement eligible as age 59½ with no service requirement.

(6) A list of the job titles and ages of all employees who, in the University's estimation, are or are not eligible for the benefit of this Agreement is available at Human Resources of the University and is incorporated herein by this reference. Refer to Exhibit E.

(7) The Employee acknowledges and agrees that the University and its representatives, agents and employees have not made, and that Employee has not relied on, any representation(s) or promise(s) from the University, its employees, representatives and agents in making his/her decision to enter into this Agreement, except for the representations and promises that are contained in this Agreement. The Employee and the University further understand and agree that this Agreement constitutes the entire understanding and agreement between them pertaining to its subject matter; supersedes any other agreement, written or otherwise, pertaining to its subject matter; and, constitutes their full obligation to one another.

The Employee acknowledges that he/she has not relied upon any representation or statement by any representative, employee or agent of the University with respect to any tax and Medicare consequence(s) of the Plan. The Employee acknowledges and accepts any tax consequence(s) and liability resulting from the Plan as his/her personal liability and will not attempt to or otherwise hold the University or any representative, agent or employee of the University responsible for any tax consequence(s) or liability resulting therefrom.

(8) This Agreement shall be binding upon the University and the Employee, as well as the Employee's heirs and executors.

(9) The Employee acknowledges that no representations have been made to the Employee regarding the availability, unavailability, level or character of retirement or severance benefits which may or may not be made available in the future to the employees of the University. The Employee affirms that the terms of the Plan represent good and valuable consideration for the Employee's retirement, regardless of any severance or retirement incentive benefits which may become available in the future to employees of the University. The Employee understands that increased, different or reduced benefits and/or additional programs of the same or similar character may be made available in the future and the Employee expressly disclaims any reliance on any representations to the contrary.

(10) As a condition of becoming a Participant in the Plan, and in consideration of benefits to be received under the Plan, the Employee waives all future employment rights, property rights, all entitlement to future wage and benefit increases, all rights to participate in any University-sponsored benefit plans (other than the right to payments under this Plan and the right to purchase continuation of health care coverage as is required under applicable federal law). The University and/or Board of Trustees reserve the right to offer or not offer similar plans in the future without obligation to those electing this Plan.

(11) The Employee, his/her beneficiary and any other person having or claiming any right to payments under the Plan or to any interest under the Plan shall rely solely on the unsecured promise of the University, and nothing in the Plan shall be construed to give the Employee, beneficiary or any other person any right, title, interest or claim in or to any specific asset, fund, reserve, account or property of any kind whatsoever owned by the University or in which it may have any right, title or interest now or in the future, but the Employee, beneficiary or any other person shall have the right to enforce his/her right to the Plan benefits against the University in the same manner as any unsecured creditor. Specifically, the Employee, beneficiary and any other person shall have no rights in any annuity or other investment account or the proceeds of any annuity or investment account purchased or entered into by the University for the purpose of providing the University with the funds to meet its obligations under the Plan.

Further, the Employee, beneficiary and any other person shall have no right to commute, sell, assign, transfer or otherwise convey the right to receive any payments hereunder, which payments and right thereto are expressly declared to be non-assignable, non-transferable, and not subject to transfer by operation of law in the event of bankruptcy or insolvency, attachment, garnishment and execution, except as required by applicable law.

(12) It is further specifically understood by the Employee and the University that this voluntary severance from employment with the University will disqualify the Employee from receipt of unemployment benefits pursuant to the provisions of the Ohio law as it constitutes a voluntary termination of employment without cause attributable to the employer.

(13) This Agreement shall be subject to, and governed by, the laws of the State of Ohio, without regard to any choice of law or conflict of laws provisions, and irrespective of the fact that Employee may now be, or may become, a resident of a different state.

(14) The sole and exclusive jurisdiction and venue for any litigation arising out of this Agreement or the Plan shall be the Ohio Court of Claims in Franklin County in the State of Ohio, and the Employee and University irrevocably consent to the personal jurisdiction of such court.

(15) In the event any parts of this Agreement are found to be void, the remaining provisions of the Agreement shall nevertheless be binding with the same effect as though the void parts were deleted.

(16) Signatures:

Wright State University

By: _____

Its: _____

Date: _____

Employee

Name: _____

Signature: _____

Date: _____

Exhibit D

Wright State University 2016 Voluntary Retirement Incentive Program Notice of Enrollment Form

To elect the VRIP, you must sign and return in person or via registered mail to Wright State University's Human Resources no later than **4:30 p.m. EST on August 15, 2016** this form along with the following forms:

1. Indication of Interest (Exhibit B)
2. Release and Waiver of Claims Agreement (Exhibit C)

You may return the above forms in the enclosed envelope.

Wright State University
Human Resources
3640 Colonel Glenn Highway
Dayton, OH 45435

Name: _____

Social Security #: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Home Phone: _____

Work Phone: _____

Home Email Address (optional): _____