

## EASTERN MICHIGAN UNIVERSITY Academic and Student Affairs

## EMERITUS FACULTY STATUS RECOMMENDATION

The Department or School o Emeritus Faculty Status for		recommends the etired faculty member:	awarding of
Name of Faculty Member:			
Current Status/Rank at EMU	J:		
Date of Hire at EMU:	R	Retirement Date:	
Number of Years at EMU:	(Minimu	um of 15 years of service required)	
Degree(s)/Institutions	Masters:		
be awarded Emeritus status aft Provost's Office.	ingent upon the approval of er their official retirement d	age application the Board of Regents. Candidates, ate. This information will be kept o	
Recommended by (please p	print) Date		
Department Head	Date	Dean	Date
Provost	Date	Date Submitted to Board	of Regents
Please continue to page 2 of	this application.		
Updated: July 2019			

## PAGE 2

Please complete the following information on the retiring/retired faculty member for whom you are submitting this recommendation. This information will NOT be shared in the Board of Regents meeting materials but is necessary for the retiree to receive his or her emeritus benefits.

Name:
EID#:
Home Address:
Telephone: () E-Mail Address:
Please forward this completed 2 page form to:
Provost Office Academic and Student Affairs 106 Welch Hall