

MPERS Retired Employee Approvals Form

The hiring authority must complete this form including obtaining necessary approvals, for Retired MPERS Employees reemployed into staff and Academic positions regardless of the nature of the new appointment.

Retiree Personal Information

Name: _____
Last First M.I.

Employee ID: _____ Phone: _____

Job title upon retirement: _____

Retirement date _____

I understand that if I earn more than 1/3 of my MPERS Final Average Compensation while working directly for EMU, I will forfeit my MPERS pension and health care until my employment ends Yes No

Employee Signature _____

Position Information

Hiring authority _____

Accepted a permanent position via recruitment process Yes No

Hired into same position Yes No. If yes, was position posted for recruitment Yes No

Employment start date _____ Appointment % time _____

Position title _____ Classification _____ Salary _____

Justification for Appointment

Please describe University need

Approvals

Division Vice President/Chief Officer Signature	President Signature
Date	Date
Chief Human Resources Officer (Required for staff positions)	Provost (Required for academic positions)
Date	Date