



RETIRE / REHIRE QUESTIONNAIRE

Name: _____
First Middle Last

Have you previously retired from:

_____ ERS (Employees Retirement System)

_____ UT (University of Texas)

_____ Texas A&M

Are you a retiree from any TRS employer?

_____ Yes

_____ No

If yes:

Name of Employer: _____

Official Retirement Date: _____

Type of Retirement: _____ Regular _____ Disability

Signature

Date