



TEACHERS' RETIREMENT SYSTEM

479 Versailles Road
Frankfort, Kentucky 40601

Reemployment Certification

Pursuant to 102 KAR 1:032, a retired member seeking reemployment with a participating employer of the Teachers' Retirement System (TRS) shall disclose any prior agreements regarding the return to work by reporting the following information to TRS. This form must be filed with TRS **prior** to the beginning of reemployment.

Member name (print)	Member TRS ID
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Hiring TRS participating employer: _____

New job title: _____

Planned start date: _____

Member Certification

I acknowledge the information provided is true and accurate, subject to penalty of perjury pursuant to KRS 523.010 et seq., and subject to having my retirement benefits voided – which would require repayment of all benefits received from TRS with interest. Check one of the following:

I affirm that I and the hiring employer ☐ **DID or** ☐ **DID NOT** have a prearranged agreement prior to my retirement to return to work in any capacity (certified or classified) after my retirement. I have or will have completed my required break in service for reemployment.

Signature	Date
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Employer Certification

I acknowledge, subject to penalty of perjury pursuant to KRS 523.010 et seq., I am the agency head, appointing authority or authorized designee of the TRS participating employer that will employ the above-named member. Check one of the following:

I have personal knowledge and confirm as the hiring employer that a prearranged agreement ☐ **DID or** ☐ **DID NOT** exist prior to the above-named member's retirement for the member to return to work in any capacity after the member's retirement (certified or classified). The member has or will have completed their required break in service for reemployment.

Authorized representative's signature	Date
Printed name	Representative's title

