



### Certified Retirement Notification

Employee Benefits Department  
Knox County Schools  
P.O. Box 2188  
Knoxville, TN 37901-2188

To Whom It May Concern:

Please accept this notification as my commitment to retire on the date listed below, in order to receive retirement benefits. I understand that this notification form cannot be rescinded without approval of the Superintendent.

My retirement date is: \_\_\_\_\_  
This date is the last day I am scheduled to work for Knox County Schools.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Employee Number or SS Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employment Place or School

\_\_\_\_\_  
Position Held

As a retired employee, I would be willing to accept temporary employment with Knox County Schools for up to 120 days during a 12-month period. (Please note: T.C.A., Section 8-36-805 permits a retired TCRS member to accept temporary employment with an employer participating in TCRS without suspension or retirement benefits provided the retired member has been retired 60 days and does not accrue additional retirement credit as a result of such employment)  
Please check one of the following:

\_\_\_\_\_ YES, I would accept temporary employment with KCS

\_\_\_\_\_ NO, I would not accept temporary employment with KCS