



Chicago Teachers' Pension Fund

NOTICE OF RETURN TO WORK

FORM 770

(rev. 06/2011)

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IMPORTANT

This form must be completed by all retirees returning to work for CPS or a Charter School in any position other than as a day-to-day substitute and submitted to the Chicago Teachers' Pension Fund no later than 30 days following the retiree's return to work.

SECTION 1: MEMBER INFORMATION

Retiree's name	first	middle initial	last	Social security number
Mailing address	street			apt. or unit no.
city	state	zip	E-mail	
Retiree's birth date	Telephone number (with area code)			<input type="checkbox"/> Male <input type="checkbox"/> Female

SECTION 2: EMPLOYMENT INFORMATION

Last pre-retirement position and location

Date of return to work _____ School or Attendance Center _____

Principal/Supervisor _____

Job Title _____

Job Description: (attach written description or describe briefly)

SCHEDULED WORKDAYS (CHECK ALL) M T W TH F S **NUMBER OF HOURS PER WORKDAY:** _____

Reason position is temporarily open _____

Date of expected return of teacher appointed to position _____

ACKNOWLEDGEMENT

I CERTIFY THAT THIS INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Retiree's signature _____ Date _____

Subscribed and sworn to before me, a Notary Public in and for the

County of _____ (seal)

State of _____

this _____ day of _____, 20 _____

Notary Signature _____