



# NOTICE OF RETURN TO WORK: PERMANENT OR ANNUAL RE-EMPLOYMENT

**FORM 773**  
(REV. 3/2018)

Chicago Teachers' Pension Fund 203 North LaSalle Street, Suite 2600 | Chicago, IL 60601-1231 | 312.641.4464 | Fax 312.641.7185 | www.ctpf.org

A CTPF retiree who returns to work for a Chicago Board of Education (BOE) or a Chicago charter school on a permanent or annual basis will have their pension benefits and health insurance subsidies cancelled. Retirees who intend to seek re-employment with a BOE/Chicago charter school employer must file this form with CTPF before returning to work, and complete any additional forms required by the Employer.

CTPF's Rules Governing Re-Employment can be found at [www.ctpf.org](http://www.ctpf.org).

## SECTION 1: MEMBER INFORMATION

<b>Member Name: First</b>	<b>M.I.</b>	<b>Last</b>	<b>Last 4 digits of SSN or Member ID</b>	<b>Date of Birth (MM/DD/YYYY)</b>	
<b>Mailing Address: Street</b>		<b>Apt. or Unit No.</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Telephone Number (with area code)</b>			<b>Email Address</b>		
<b>Did you retire under the Illinois Reciprocal Act?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>If you answered yes, please list your final system:</b>					
_____					
_____					
_____					

## SECTION 2: EMPLOYMENT INFORMATION

<b>Date of Return to Work:</b>
<b>School or Attendance Center:</b>
<b>Principal/Supervisor:</b>

## SECTION 3: ACKNOWLEDGEMENT

I certify that my return to work is permanent and annual. I understand that my pension benefits and health insurance subsidies will be cancelled retroactive to the date of re-employment.

I will be obligated to repay all pension benefits and health insurance subsidies received from the date of re-employment until the date I reapply for a pension and my pension application is accepted.

<b>Member Name</b> <i>(Please Print)</i>	<b>Member's Signature</b>	<b>Date</b>
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