Re-Employment Worksheet for Retirees Returning to Work

Section A. Member Information.

First Name	M.I.	Last Name		Suffix
Mailing Address				SSN (Last 4 Digits)
City	State	Zip Code	Telephone	Mobile Phone
Position Title			Member ID	Date of Birth

Section B. Retirees are subject to earnings restrictions.

Retirees may be subject to earnings restrictions upon returning to work. This worksheet is for your personal use and you may choose to share this worksheet with your employer.
For more information about return-to-work laws, please visit www.myNCRetirement.com.

Section C. Current Monthly Benefits.

☐ I am currently receiving a monthly benefit from the following: (check all that apply)

- ☐ Teachers' and State Employees' Retirement System (TSERS)
- ☐ Local Governmental Employees' Retirement System (LGERS)
- ☐ Consolidated Judicial Retirement System (CJRS)
- ☐ Legislative Retirement System (LRS)
- ☐ Disability Income Plan of North Carolina (DIPNC)

☐ I am not currently receiving a monthly benefit from any of the above listed systems.

Section D. Additional Information.

As a retiree, if your employment subsequently creates an overpayment of benefits from the Retirement Systems Division, you are fully responsible for the repayment of the said overpayment.
You may submit this form to your employer for their records.

Thank you.