

**TRANSMITTAL FOR  
EMERITUS/EMERITA STATUS REQUEST**

Date: \_\_\_\_\_

Name \_\_\_\_\_

UIN: \_\_\_\_\_

Emeritus/Emerita Title: \_\_\_\_\_

Retirement Date: \_\_\_\_\_

Department 1: \_\_\_\_\_

College 1: \_\_\_\_\_

Department 2: \_\_\_\_\_

College 2: \_\_\_\_\_

APPROVALS:

Department 1: \_\_\_\_\_ Date: \_\_\_\_\_

Typewritten Name: \_\_\_\_\_ Signature: \_\_\_\_\_

College 1: \_\_\_\_\_ Date: \_\_\_\_\_

Typewritten Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Department 2: \_\_\_\_\_ Date: \_\_\_\_\_

Typewritten Name: \_\_\_\_\_ Signature: \_\_\_\_\_

College 2: \_\_\_\_\_ Date: \_\_\_\_\_

Typewritten Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Provost Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Provost or Designee