



## Rehired Retirees Information and Acknowledgment Form

The purpose of this form is to ensure that you, the LASERS retiree, are aware of your retirement options upon returning to work and the potential impact this will have on your retirement benefits. In addition, the hiring department is acknowledging their responsibility when hiring a LASERS retiree. Rehired LASERS retirees fall into one of two categories:

### **I. Retirees rehired in a Classified/Civil Service position**

Under this scenario, the LASERS retiree is required to elect one of the re-employment options below that formally appears on the LASERS Re-employment of Retiree form (10-2). The LASERS Form 10-2 must be completed and submitted to the Benefits Service Center for agency certification within 30 days of re-employment, and subsequently submitted to LASERS within 45 days of re-employment.

<b>Option 1A</b>	Retiree cannot earn more than 50% of their annual retirement benefit each fiscal year. If this limit is exceeded, the retiree's future retirement benefits will be reduced by the amount the earnings exceed that limit.
<b>Option 1B</b>	Retiree that is 70 years of age or older and retired with at least 30 years of service is exempt from any suspension or reduction of retirement benefits.
<b>Option 2</b>	Retiree has the option to repay all their retirement benefits and return to active status (DROP or ILSB participants are excluded).
<b>Option 3 (Default)</b>	Retiree elects to suspend their retirement benefit during the period of the re-employment.

### **Rehired Retiree Acknowledgement**

I am aware that if I accept re-employment in a LASERS eligible position, I have 30 days from my hire date to complete the LASERS Re-employment of Retiree form (10-2). Failure to do so will result in **automatic enrollment in Option 3**.

As a LASERS retiree, I acknowledge that I have read and understand the terms of my re-employment and I am aware that accepting employment through Louisiana State University may lead to the reduction or suspension of my retirement benefits or may lead to repayment obligations if I exceed the limitations.

\_\_\_\_\_  
Signature of Retiree/SSN or LSU ID

\_\_\_\_\_  
Date



**II. Retirees rehired in a Professional/Academic part-time, temporary position**

Under this scenario, there is no impact on the retiree’s retirement benefit. However, the LASERS retiree is required to elect one of three options by contacting a Benefits Service representative. If an option is not selected, the retiree will automatically default to Option 3.

<b>Option 1</b>	Retiree can elect to participate in Louisiana Deferred Compensation plan (Retiree contributes 7.5% and LSU contributes 6.2%).
<b>Option 2</b>	Retiree can elect to participate in the Optional Retirement Plan (Retiree contributes 8%. LSU contributions will vary every fiscal year).
<b>Option 3 (Default)</b>	Retiree can elect to not participate in any retirement plan and not pay any retirement contributions.

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**Hiring Department Use Only**

As the hiring department, we acknowledge it is our responsibility to notify HRM in writing within 30 days of reemployment if a retiree is re-employed in Category I. Failure to do so may result in the suspension of the retiree’s retirement benefits.

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**Signature of Hiring Department Representative**

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**Date**