

Illinois High School & College Driver Education Association

September 12, 2014

To: Regional Director/Workshop Chair
RE: 2015 Retirees

Please give the enclosed form to anyone at your fall workshop, or in your region, that will be retiring at the end of this school year. If the retiree is to be recognized in the preconference issue of IDEA Journal, the enclosed form must be received by **February 3, 2015**. If the retiree is to just be included in the program at the state conference, the enclosed form must be received by **April 3, 2015**. The information on the retiree can also be sent via telephone or email.

Please duplicate as many forms that you feel you will need.

Note that this Retiree Information Form is to be returned to me.

Hope your workshop is a success and good luck in the school year.

Sincerely,

Carl Magsamen
Retiree Chairman
1139 W. Schaumburg Road
Schaumburg, IL 60194-4149

Phone: 847-301-0615

Email: rcmagsamen@gmail.com

**IHSCDEA
Retiree Information Form**

(Please print all information)

Name _____ Date _____
(Name as you want on the Certificate of Recognition)

Number of years teaching Driver Education _____ IHSCDEA
Region _____

School Name _____

School Address _____

_____ ZIP _____

School Phone (_____) _____ - _____

Home Address _____

_____ ZIP _____

Home Phone (_____) _____ - _____

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**Return A.S.A.P to:
Carl Magsamen
Retiree Chairman
1139 W. Schaumburg Rd.
Schaumburg, IL 60194**

Phone: (847) 301-0615
Email: rcmagsamen@gmail.com