



46 State House Station
Augusta, ME 04333-0046
Telephone: (207) 512-3100
Toll-free: 1-800-451-9800
TTY: (207) 512-3102

**PERSONNEL STATUS
CHANGE FORM**
(For Teacher/PLD Employers)

Instructions to Payroll Clerk: Complete and return this form to the Employer Services Unit of MainePERS whenever a member's status changes. The timeliness of MainePERS receiving this form is important. The information provides the basis for granting creditable service or processing a retirement application. Check the box(es) next to the heading below that indicate(s) the reason for the personnel action being reported.

Member Name:

(Prefix)	(First)	(MI)	(Last)	(Suffix)

Social Security Number:

--

 Date of Birth:

(mm)	(dd)	(yyyy)

Mailing Address:

(Street/PO Box)	(City)	(State)	(ZIP)

Employer Location Code:

--

 Employer Location Code:

--

Leave of Absence Begin or Return

LOA BEGIN:

(mm)	(dd)	(yyyy)

LOA END:

(mm)	(dd)	(yyyy)

REASON: ☐ Seasonal Layoff ☐ Workers' Compensation ☐ FMLA
☐ Sabbatical ☐ Military Leave ☐ Suspension
☐ Authorized Leave of Absence ☐ Unauthorized Leave of Absence

Termination/Separation

Reason: ☐ Terminated Employment ☐ Separated from Membership ☐ Deceased

LAST DAY ON PAYROLL:

(mm)	(dd)	(yyyy)

Certifying Signature

The above information is true and correct to the best of my knowledge.

Certifying Official Signature

Date

Print/Typed Name

Phone

E-mail