

**UTAH STATE UNIVERSITY
EARLY RETIRE REHIRE FORM**

Date

This form authorizes payment to Early Retirees who perform services in conjunction with their Early Retirement incentive payment.

EMPLOYEE RECEIVING PAYMENT

Name A# Title

Dept. providing payment College/Divison

Early Retiree 25% or less fiscal year employee
Salary 33 1/3 or less academic year employee

Allowed per year amount

PAYMENT JUSTIFICATION

Dates Service will be performed to Number of hours per day

Service Performed/Explanation

PAYMENT INFORMATION

Per hour rate Rate X Hours = Total

OR

Agreed upon rate Agreed upon rate X Months = Total

E&G funded Grant funded

Employee Date _____

Department Head/Director Date _____

Dean/Vice President Date _____

Provost (only needed if employee is faculty) Date _____