

Human Resource Services



| Request for Faculty Emeritus Status | |
|--|--|
| Name Kathyun M/pchi Department of | 70chily UID 408846 |
| I wish to retire from my position as <u>Student Fl</u> | achin Cooldinator |
| at the University of Northern Iowa, effective <u>Tune 30</u> | 2017 |
| I have twenty (20) or more years of credible service in higher educations of the service in higher edu | ation. (List institutions and dates of employment) |
| Institution 10 mg 10 mg 10 mg | . Date |
| | May Date |
| | Aug - 1987 Aug Date |
| Signature of Applicant | 4-14-2017 |
| y Signature or Applicant | Date |
| College Chair Senate: Include a statement verifying that ten (10) y the University of Northern Iowa. (Use the back of this form if more s | ears of meritorious service has been concluded with pace is required.) |
| 1082 | 12/11/17 |
| College Senate Chair | Date |
| Approved and Accepted | |
| In Lauruka | B. 14. 17 |
| Department Head | Date 12/11/17 |
| Dean of College (if applicable) | Date |
| University Faculty Senate Chair | Date |
| Provost and Vice President | Date |
| President | Date |

Please prepare this form: sign and submit to your department head. When the process for approval has been completed, the division head's office will make copies and distribute them to each of the above signatories and the Department of Human Resource Services.

Revised 11/2012