Request for Faculty Emeritus Status

Name: Dianna Briggs	Department: Teaching	UID: 128049
I wish to retire from my position a	s: Assoc Professor	
at the University of Northern Iowa,	effective 5/11/2018	
I have twenty (20) or more years o	of credible service in higher education	. (List institution and dates of employment)
Institution	Start Date	End Date
University of Northern Iowa	8/1978	5/2018
	atement verifying that ten (10) years o Use the back of this form if more spac	of meritorious service has been concluded with e is required).
Zeitz, Leigh E		7/30/2018
College Senate Chair		Date
Approved and Accepted:		
PAF HRIS Admin		
Human Resource Services		Date
Lasswell, Terri A		7/31/2018
Department Head		Date
Jean-Marie, Gaetane		8/7/2018
Dean of College (if applicable)		Date
Walter, Michael H		
University Faculty Senate Chair		Date
Wohlpart, Alfred J		
Provost and Vice President		Date
Nook, Mark A		
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.