REEMPLOYED RETIREE NOTIFICATION
FOR COLLEGE AND UNIVERSITY EMPLOYERS

Section 1 — Employee Information

Name ____________________________________________________________
Social Security no. ________________________________________________
Birth date ________________________________________________________
Gender:  
❑ Male  ❑ Female
Address _________________________________________________________
City _____________________________________________________________
State_____________________________  ZIP code __________________
ARP eligible:  
❑ Yes  ❑ No
First date of service after retirement ________________________________
Type of retirement benefit:  
❑ Age and service retirement  ❑ Disability
Effective retirement date ____________________________________________
Ohio public retirement system paying the benefit:  
❑ State Teachers Retirement System of Ohio  
❑ Ohio Public Employees Retirement System  
❑ School Employees Retirement System of Ohio  
❑ City of Cincinnati Retirement System  
❑ State Highway Patrol Retirement System  
❑ Ohio Police & Fire Pension Fund

Section 2 — Employer Information

School ___________________________________________________________  Employer number _________________________
Name___________________________________________________________  Title ________________________________
❑ Please check this box if this retiree was reemployed under Section 3307.353, Revised Code, that requires public
  notices be given and public meetings be held for certain rehires.

I certify that the requirements for reemployment under Section 3307.353, Revised Code, were met.

Signature ___________________________________  Date ____________________________

Instructions

You must notify STRS Ohio of the employment of a retiree of an Ohio public retirement system within 10
days of his or her first date on payroll.

Please log in to the secure Employer Account Information area of www.strsoh.org/employer to submit
the information online (preferred), or fax this completed form to STRS Ohio at (614) 227-7893.

Note: If the employee recently retired from your school, you do not need to submit Form SSA-1945. Otherwise,
you must send STRS Ohio a properly completed Form SSA-1945 signed by the employee. Please print a copy
of the form from the Online Forms section of our Web site and fax it to (614) 227-7893.