



## RETIREMENT INFORMATION SHEET

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Please Print

**Are you currently receiving compensation or benefits from the Retirement System of Mississippi (PERS)?**

Please check one:  YES  NO

If YES, Complete PERS Form EVI (Employee vs. Independent Contractor)

\_\_\_\_\_

Signature: \_\_\_\_\_

HR/HR Forms/EVI Question