



# Notice to PERAC of Reinstatement of Duties

Form Last Revised: December, 2020

*PERAC must maintain information on reinstatement determinations and other actions taken with regard to the Evaluation and Restoration to Service process as defined by G.L. c. 32, § 8. Please complete this form and return to PERAC.*

**Retirement Board:**

**Member Name:**

**Date:**

The above named Retirement Board received PERAC's Restoration to Service medical report. The medical report determined that the above named member is able to perform the essential duties of the position from which he/she retired, or a similar position within the same department for which he/she is qualified.

**The following action was taken** (please check applicable action and date taken):

**Date:**

<input type="checkbox"/>	• The member has been restored to his or her former position.	<input type="text"/>
<input type="checkbox"/>	• The member has been placed on a list for the next available job within the same department for which he/she is qualified.	<input type="text"/>
<input type="checkbox"/>	• The member has been restored to a similar job within the same department for which he/she is qualified.	<input type="text"/>
<input type="checkbox"/>	• The case is pending an appeal or court decision. <i>Please describe the current legal status of this case:</i>	<input type="text"/>

*A copy of the final decision should be forwarded to PERAC.*

## Retirement Board Chairperson Signature

**Retirement Board  
Chairperson Signature  
(or Designee):**

**Print Name:**

**Date:**