



**MISSISSIPPI STATE**  
**UNIVERSITY™**

**Emeritus/Emerita Recommendation Form**

Please complete this form and include with each recommendation.

**Title:**

**Full Name:**

**Current Home Address:**

**Department:**

**Department Head:**

**Last held title:**

**Emeritus/Emerita Honorary Title:**

**Years of Service:**

**Retire date:**

**MSU ID#:**

**Person completing this form and contact information:**

\*Please refer to AOP 13.01 for the procedures on submitting a recommendation.