Retiree Questionnaire
PLEASE PRINT

Title:__________  Name:__________________________________________________

Email:________________________________________________________________

Information for publication in the Review and other campus news

1. Years of employment at Millersville: From___________ to ________________

2. Position(s) held at Millersville:________________________________________
_________________________________________________________________
_________________________________________________________________

3. Department/Division Served:_________________________________________

4. Fondest Memories of Your Days at Millersville:__________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

5. Highlights and Activities Since Retiring:
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Please see the other side for additional information!
Information in helping us connect with others

1. Who are alumni with whom you maintain contact:
_________________________________________________________________
_________________________________________________________________

2. Who are retired faculty/staff/administrators with whom you maintain contact:
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Help us better serve you

1. What types of events/programs at Millersville University would you be interested in participating in/volunteering at/attending (circle all that apply):

   Educational Seminars geared toward Retirees   Travel
   Computers/Information Technology Sessions   Performances
   Homecoming/Reunions   Athletic Events

    Other __________________________

2. I would appreciate information about (circle all that apply):

   Library Access   Use of Pucillo Gymnasium/Fitness
   Parking Pass   Volunteer In Service
   Email Account   ID Card

Please Return To:

Millersville University
Attn: Francis Schodowski
Duncan Alumni House
PO Box 1002
Millersville, PA 17551